‘Thinking Differently’ about young people and alcohol: an evaluation of preventive trial interventions in Scotland

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The Thinking Differently – Young People and Alcohol partnership was launched to trial innovative, preventative interventions to reduce alcohol-related harm in Scotland. This report investigates the potential for tackling alcohol misuse by increasing community capacity. It explores how far young people can be facilitated to be agents of change in terms of their peers, parents and the wider community, rather than focusing on young people’s own drinking perceptions and behaviours.

The projects focused on parents, peers and the community. Working with them to construct a theory of change and evaluation plan over three years, the study constructed a picture of what each did and assessed how possible it was to focus on each area.

The report shows that:

- Young people can be involved in work on alcohol without being problematic drinkers.
- It was hard to position alcohol in the projects, as it was in competition with other interests and health concerns.
- We need to make any message resonate with young people.
- Parents are best engaged directly.
- Peer education, peer activism and groupwork are promising.
- Young people respond well to community engagement, but change takes time.
- If projects are youth or community led, the outcomes need to be co-produced.
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Funders’ foreword

The ‘Thinking Differently’ programme was funded by a partnership of five grant-making organisations: Joseph Rowntree Foundation; The Robertson Trust; The Tudor Trust; Comic Relief; and BBC Children in Need. Together, they made £1.2m available to organisations to trial innovative, preventative interventions designed to reduce alcohol-related harm in young people in Scotland. We saw this as an opportunity to:

• reach grass-roots youth- and community-led projects
• try out innovative community approaches to reducing harmful drinking by young people, with an emphasis on peer and family learning, informed by findings from research
• add value by creating learning networks between the individual projects
• influence Scottish Government policy and funding
• enable a group of experienced independent funders to learn from each other.

We feel that these objectives were mostly fulfilled. The delivery organisations and young people who participated in the projects worked very hard and tried a range of new approaches. The projects achieved many of their individual outcomes, and made a big difference to the lives of some of the people they worked with. We are hugely grateful to the organisations for all the hard work and expertise they put into the programme.

The programme-level outcomes that we set were ambitious and long term in nature, and we didn’t expect the projects to be able to achieve these within the lifetime of the programme. However, we were very pleased to see that the organisations achieved many of the steps of change that are likely to achieve these outcomes long term.

A significant lesson for all the funders involved has been that, if projects are to be truly youth led and meaningful to young people, it’s the young people rather than the funders who should choose the issues that they will focus on. On reflection, we feel that it would have been better to set the outcomes in collaboration with the delivery organisations and the young people whom they worked with.

The funders also learned about issues to consider when adopting a partnership funding approach. These include the need to:

• ensure a clear understanding of each partner’s culture, processes and capacity to implement a shared vision
• allocate time and resources to enable application and reporting processes to align
• designate a lead partner who can provide a leadership and co-ordination role.

We are very grateful to Professor Liz Todd and her team for their valued contribution. We hope that the learning detailed in this evaluation report will provide some useful information for practitioners, commissioners and policymakers working in this field.
Executive summary

Context

The ‘Thinking Differently – Young People and Alcohol’ partnership was launched to trial innovative, preventative interventions designed to reduce alcohol-related harm in Scotland. The philosophy of Thinking Differently has been to regard young people who are involved in the project as potential agents of change in their various communities, not to see them as the main group in need of a changed approach to alcohol use. This is different to the predominant approach to tackling the societal problem of alcohol; which is to make direct changes to people’s drinking behaviour. Consequently, none of the projects were required to measure the perceptions of alcohol or the behaviour of the young people taking part. The overall theory of change (ToC) being investigated was whether young people could be helped to be agents of change in terms of their peers, parents and the wider community – the three foci of the projects.

Three projects were carried out over three years in different organisations in Scotland: Midlothian Young People’s Advice Service (MYPAS), which focused on peers; YMCA Glenrothes, with a focus on parents; and Healthy ‘n’ Happy in Rutherglen and Cambuslang, which focused on the community.

Box 1 Project organisations

**MYPAS in Midlothian** is an information and advice service for young people. In having a focus on ‘peers’, the aim was to recruit young people who did not have referred problems in alcohol, and to work with them and their peers towards increasing access to positive peer activities and friendships.

**YMCA Glenrothes** aims to deliver practical support, services and information, and to be a ‘safety net’ for people in need. Its focus in Thinking Differently was on parents, and it aimed to support young people to create key alcohol messages and deliver them to parents. This was to create opportunities for dialogue in families about drinking, leading to changes in knowledge, attitudes and behaviour. In the second year, the focus changed to engaging parents directly, rather than through young people’s messages, and putting alcohol awareness in local health-based learning programmes.

**Healthy ‘n’ Happy in Rutherglen and Cambuslang** is a community development trust that aims to be steered by local rather than externally driven priorities. The aim in the first year was for young people and communities to identify the issues that needed to be tackled and empower them to make changes, in the belief that this would, given time, impact positively on the culture of alcohol misuse in those areas. In the second year, the aim was streamlined to focus on the core aim of the project - a youth-/community-led project in which local young people and adults developed ideas to tackle alcohol harm in their area and become organised, active and influential.

This independent evaluation, commissioned by the Thinking Differently Partnership, used a ToC evaluation approach and was carried out between September 2013 and July 2017.
Key findings

Young people were able to be involved in work on alcohol where the context was alcohol yet young people were not positioned as problematic drinkers. They responded with a range of ways for this work to happen and engaged with projects, whether the focus was on family, peers or the community. There was varied evidence of developing knowledge, awareness and discussion about alcohol harm, and some evidence that others took action (i.e. adults sought help) as a result of the work of the young people.

Family focus. There was little evidence that messages created by young people would lead to improved family understanding about and confidence in influencing young people, or increased understanding about their own alcohol use. Young people created powerful messages about alcohol and found several avenues for them to be communicated to parents. It was difficult to know when and how messages had been received and on what scale.

Engaging parents directly, rather than through young people’s messages, and putting alcohol awareness into local health-based learning programmes were found to be more effective. The young parents in YMCA Glenrothes worked as a group, looking at their role as parents when discussions about alcohol were integrated into the wider theme of health. The parents valued the relationships built up with other parents and staff. Almost all had new ways of talking about alcohol, and many more had the confidence to challenge and discuss drinking attitudes.

Peer focus. Peer relationships in different forms of groupwork contributed positively to the development of knowledge, skills and confidence in thinking and talking about the dangers of drinking. There was evidence that young people were in a better position to help their peers, but no evidence (at this stage) of young people developing the sort of protective peer networks that evidence shows can support harm reduction.

Various models of peer involvement were developed; all had some success in engaging peers. Peer mentoring was particularly promising in YMCA Glenrothes. The young people were able to produce and convey a range of messages about drinking behaviour that were well received, with increased awareness of alcohol harms and an ability to talk about drinking. Youth activism emerged as a promising model in Healthy ‘n’ Happy. In Midlothian Young People’s Advice Service (MYPAS), weekly groupwork that encouraged young people to bring friends showed evidence of a developing awareness and knowledge of alcohol harms, among other health-related concerns, and more confidence generally. What came across from all three projects was young people’s interest in and motivation for helping other young people, including by some of those who were themselves positioned by workers as needing support.
Community focus. The engagement of the local community was achieved, as was a contribution by young people to positive activities in the community. The focus of some of the activity was on alcohol concerns. There was evidence of some impact in terms of discussion about alcohol culture and the temporary repurposing of an area often used for drinking. However, there was a lack of evidence that this led to an increase in the skills and knowledge of community members in relation to alcohol or a reduction in alcohol-related incidents. Long term, there are unlikely to be quick wins when working with the community to create such changes.

Young people (Healthy ‘n’ Happy) demonstrated that they were able to take leadership roles in various processes of community engagement, and drinking issues could be part of this change. They were part of the process of defining the actions that would be taken in relation to alcohol concerns. Community engagement seemed to enhance young people’s skills, knowledge and confidence in general, and their knowledge in relation to alcohol and ability to discuss drinking concerns.

Implications for involving young people in work on alcohol

- It was not easy to position alcohol in the projects, as it competed for space with other interests and other health concerns. A focus on alcohol only is unlikely to engage young people. Similarly, a promising approach for parents is to look at alcohol as one of a range of health issues.

- Further work is required to figure out how to make any messaging (including health promotion messaging) around alcohol resonate with young people. Co-production of messages may help, but may not be sufficient.

- To facilitate dialogue about drinking, it is likely that parents are better engaged directly than through messages constructed by young people.

- Peer education, peer activism and groupwork are promising ways for young people to influence other young people on a range of complex social issues including alcohol. Many young people are keen to help other young people.

- Young people respond well to engaging with the community, can be supported to demonstrate leadership in community development and want to help, but change takes time.
Implications for effective youth and community development working on complex issues

The evaluation findings have relevance to effective youth and community development on a range of complex social issues, not just alcohol.

- If projects aim to be youth led or community led, then the nature of the desired outcomes need to be co-produced with the young people or community, rather than imposed by funders or commissioners. Youth involvement in community approaches, due to the complexity of communities, is likely to be contingent on the specific resources available in that community.

- If projects aim to be innovative (and a change from what the organisation is known for), extra time must be allowed for the various aspects of change. A ToC approach can, at the same time, evaluate outcomes and facilitate learning and reflection. The quality assurance and reporting frameworks to funders or commissioners need to be appropriate to a culture of learning.

- Full project costing, necessary if replicating or scaling up, may include inputs that are not usually costed, such as unpaid volunteer time and staff time in partner organisations.

- Partnership with other organisations can considerably increase the reach of projects, although delivery agents and partners can also be barriers when embarking on more innovative approaches.
1 The projects

This is the final report of the evaluation of the Thinking Differently programme in Scotland. This programme aimed to encourage a different approach to young people and alcohol by recognising the complexities of young people’s decision-making about alcohol consumption and the nuanced role that parents, peers, mentors and the community play in this. Thinking Differently emerged from previous evidence that traditional interventions, based on health promotion messages about alcohol, are unlikely to change behaviour, and that the problem of alcohol misuse may be better addressed by changing general attitudes to alcohol, rather than (or in addition to) targeting individuals who are individually vulnerable to alcohol misuse. The programme therefore situates young people as potential agents of change, rather than as a problem to be ‘fixed’. As a consequence, none of the projects were required to measure alcohol perception or the behaviour of the young people taking part. The overall ToC being investigated was whether young people could be facilitated to be agents of change in terms of their peers, parents and the wider community that comprised the three projects’ foci.

The projects that were chosen to experiment with a new approach were based in Midlothian, Glenrothes, and Rutherglen and Cambuslang Newcastle University, in partnership with Tecis Ltd, was commissioned by the Joseph Rowntree Foundation on behalf of the Thinking Differently partnership to conduct a three-year evaluation of these three projects. The projects were carried out over three years by MYPAS in Midlothian, focusing on peers; YMCA Glenrothes, with a focus on parents; and in Rutherglen and Cambuslang, at Healthy ‘n’ Happy, focusing on the community. Projects also made contributions to other foci. For example, although YMCA Glenrothes focused on parents, it had a significant peer education programme as part of Thinking Differently. The details of each project are in this report, therefore the content is attributable. However, whenever possible, in order to maintain individuals’ confidentiality, the quotes have not been directly attributed.

Each of the projects was commissioned by the Thinking Differently partnership, a collaboration of several funding bodies to pool resources to fund innovative youth-led projects. The partnership decided upon two primary outcomes, PO1 and PO2, that all of the projects should work towards over three years.

PO1: Reduce alcohol-related harm and associated risky behaviour by young people;

PO2: Build practical, sustainable skills and knowledge to empower young people, parents/carers and the community to take action to address local alcohol concerns.
Given the *indirect* nature of the approach of Thinking Differently, it was agreed that the projects would all work *towards* PO1, and funders recognised that evidence of changed behaviour against PO1 was unlikely in the projects' timescale. In addition, the funding partnership specifically commissioned these projects for their potential to meet further outcomes (working towards PO2), focused on communities, parents, or young people and their peers.

**Project one: MYPAS, Midlothian**

MYPAS in Midlothian is an organisation that traditionally works with young people referred to them in need of information, therapy and other services for sexual health, mental health, and substance use or misuse.

In having a focus on peers, the aim was to recruit young people who did not have referred problems in alcohol, and to work with them and their peers to increase access to positive peer activities and friendships. Their aim was early identification and early intervention. Over the three years, MYPAS worked with 55 young people in eight groups on both issues identified by the young people (i.e. sex and relationships, alcohol, drugs and energy drinks, team building, stereotypes and discrimination) and social activities (rock climbing, bushcraft, trampolining, cycling and attending a comedy festival). Two part-time staff were employed to carry out the work alongside sessional workers and volunteers.

Thinking Differently was taken by MYPAS to mean working with young people who were *not* from their usual target group; that is, with those who were not referred to with problems with alcohol, rather than those who were. It was also taken to mean that groupwork would include working with young people and their friends.

*YP1: Increase the social and personal development skills of young people in addressing alcohol-related harm;*

*YP2: To improve young people’s decision-making capacity in relation to the choices they make around alcohol;*

*YP3: To change attitude and behaviour towards alcohol consumption and associated risky behaviour at both the individual and peer group levels;*

*YP4: To develop protective peer networks which support harm reduction, moderate behaviour around alcohol, support positive decision making and build resilience.*

MYPAS was given four additional outcomes (YP1–4) in respect of young people and peers. It intended to reach these outcomes by providing opportunities during groupwork with individuals and their friends for them to develop their capabilities and strengthen their friendship networks. In addition, the action group was intended to develop capacity for
the young people to take a more active part in supporting peers. A peer-mentoring strand was expected to develop from these activities, yet did not happen in the lifetime of the evaluation. For a detailed description of these strands of action and mechanisms by which they were expected to meet the intended outcomes, see Annex e 1.

The project recruited young people to groups in a targeted way, inviting referrals initially from local organisations and then schools. A summer programme was implemented to maintain the engagement of young people. In order to encourage positive peer relationships, young people were recruited alongside their friends, or in friendship groups.

An action group of five young people was set up to support the development of the project in the first year, but there were difficulties in getting the young people of the action group to participate in shaping and guiding the project. A subsequent partnership with a local film project (Screen Education Edinburgh) enabled another action group to be recruited (16 young people took part, and a stable core group of six formed a new action group), with the aim of providing alcohol education for peers via the film and other resources. The six-week course involved camera work and equipment, storyboarding, acting and exploration of alcohol use and culture. Each young person created a story. Two films were produced using the ideas of the group and screened at the Edinburgh Film House cinema. Each young person gained an arts award for their involvement and the project received recognition through the local newspaper. Four of these young people took part in research training at Newcastle University, and went on to present their experiences at a national conference supported by the evaluators.

**Project two: YMCA Glenrothes**

The YMCA has been providing support to local people in the Glenrothes area for over twenty years, predominantly for the homeless, and youth work (generic and targeted) centred on substance misuse. The Glenrothes Youth Forum conducted a survey of pupils at three catchment secondary schools and found that, at the age of about 13 or 14, most young people were changing their view about alcohol from being negative to being positive about it. Parents were purchasing alcohol for about half of the young people, and experiences of alcohol were starting at home. The forum also identified that, at that time, alcohol use was not being discussed in local schools. Members of the Youth Forum developed the ideas for the application to the Thinking Differently partnership. Thinking Differently was placed in the drug and alcohol strand of YMCA Glenrothes’s work with a project co-ordinator.
The theme for this project is families. YMCA Glenrothes developed a clear ToC in which the actions of young people in creating key messages about alcohol were intended to encourage conversation between parents and children, and to explore their relationships with alcohol leading to change in knowledge, attitudes and behaviour. Therefore, in addition to the two primary outcomes PO1 and PO2, YMCA Glenrothes had three family outcomes (FO1–3) to achieve.

**FO1:** To enhance families’ confidence and ability to develop positive approaches in influencing young people’s drinking habits, attitudes and beliefs about alcohol;

**FO2:** To increase parents’/carers’ capacity to address and support their children with issues and concerns in relation to alcohol and associated risks;

**FO3:** To promote and improve the understanding amongst parents/carers of the impact their own alcohol use and associated risks may have on their children.

Several groups of young people worked on messages about alcohol through different media, including film, song writing, radio, animation and art. These were to be shared with parents during a number of events including a World Café, radio broadcasts, youth information points and parents’ evenings. The reach of this project was extended by working with a range of external partner organisations.

Radio adverts on how alcohol can affect family life have been aired on Kingdom FM and played at key times throughout the day, with a potential reach of 80 thousand listeners. A World Café event used games and activities to stimulate thinking and discussion on alcohol, and showcased some of the messages that young people had created.

A peer education programme had several groups of secondary school-aged young people on peer education programmes that lasted several weeks, designing and sharing messages about alcohol with younger peers in schools.

The YMCA Glenrothes project changed direction in the second year to engage parents directly, rather than through young people’s messages, and to put alcohol learning into local health-based learning programmes. This was achieved through activities including: work with students; the alcohol World Café event; work with two adult groups to create radio adverts; work with teen parents; and a lifestyle group for parents.

Groups of teenage parents have shared their experiences with alcohol and explored the role of parenting on attitudes to alcohol. More recently, teen parents have been encouraged to think about becoming community health champions for other parents. This work is ongoing. The project has also engaged with young people, teachers and
parents more widely by the use of ‘youth information points’ that raise awareness of alcohol and consult on attitudes to alcohol, and by attending parents evenings.

Almost a thousand young people and parents have been involved in a range of activities (see Table 1), with a wider reach of seven thousand people (in addition to those who listened to the radio). YMCA Glenrothes was particularly effective in engaging partner organisations to work with them, and this was how it managed to work with such a large number and range of young people. Further details about the steps of change that YMCA Glenrothes expected to see as a result of these actions are in Annexe 1.

Table 1 Activity in YMCA Glenrothes, Year 3

<table>
<thead>
<tr>
<th>Activity</th>
<th>No. of sessions/events</th>
<th>No. of attendances</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radio project</td>
<td>8</td>
<td>96</td>
</tr>
<tr>
<td>Teen parents group</td>
<td>38</td>
<td>334</td>
</tr>
<tr>
<td>Community outreach activity</td>
<td>18</td>
<td>280</td>
</tr>
<tr>
<td>Young educators project</td>
<td>18</td>
<td>195</td>
</tr>
<tr>
<td>Young people in supported accommodation groupwork</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Young care leavers groupwork</td>
<td>6</td>
<td>24</td>
</tr>
<tr>
<td>Direct work with expectant parents</td>
<td>3</td>
<td>14</td>
</tr>
</tbody>
</table>

Project three: Healthy ‘n’ Happy, Rutherglen and Cambuslang

This Thinking Differently project was run by Healthy ‘n’ Happy Community Development Trust, which works across Rutherglen and Cambuslang. The organisation has been running for ten years and the board of directors is made up of local residents. Their work area includes services to increase confidence and self-esteem, to boost skills and relationships, to raise awareness of health issues and healthy living, and to support residents to take action in their local neighbourhoods. These include volunteering, mental health, stress management and family support, healthy living and social activities, anti-stigma campaigning, community capacity building and local activism. At the time that the Thinking Differently project started, it had 17 full-time staff, 30 sessional staff and a team of over a hundred volunteers, and it has since expanded.
Healthy ‘n’ Happy took an assets-based preventative approach. It used a social model of health, recognising environmental factors, and worked with communities with the view that when young people are organised, active and influential, they tend to be happier. The aim was to involve young people so that there was a change at grass-roots level.

The trust conducted two pieces of research in 2010 and 2011 called ‘It’s Not Just the Drink Talking’, in which it talked to local people about issues and concerns with alcohol in the local area. This informed the alcohol prevention work. The Thinking Differently application was something that the young people working with the trust wanted to see happen, and the resulting project concentrated on working towards the community outcomes (CO1–3) set by the Thinking Differently partnership.

- **CO1**: Engage the local community and affect change on the local alcohol concerns defined by the community;
- **CO2**: Increase the contribution and involvement of young people in positive activities within the local community;
- **CO3**: Reduce the number of alcohol related incidents within the community, particularly amongst young people.

The trust worked with two localities, Halfway (in Cambuslang) and Burnhill (in Rutherglen), to enable communities to identify the issues that needed to be tackled and empower them to make changes, in the belief that this, given time, would impact positively on the culture of alcohol misuse in those areas. Healthy ‘n’ Happy worked for young people to shape the project according to their own health priorities. Door-to-door visits were carried out with residents of Halfway by the project to build relationships and conduct a survey of the perceived needs. A photography project and community event (a family fun day) were designed to help to identify problems and enable intergenerational dialogue about how they could be tackled. During the first year of the project, a ToC was clearly articulated to demonstrate how actions such as the photography project and community events would increase community dialogue and lead to change. However, it was identified that this would change to reflect the pathway/journeys of young people, activists and community members rather than the activity streams.

In the second year, the focus was refined to the core priorities of the project - a youth/community-led project in which local young people and adults developed ideas to tackle alcohol harm in their area and became organised, active and influential. A new theory was devised, concentrating on increasing both the awareness and the capacity of young people (including a group of activists) and other residents to effect change on local alcohol concerns. More detail is contained in Annex 1.
In the third year, there was much work undertaken to act upon the idea to provide increased youth provision. This led to street engagement, a barbecue, input from LANDED and other diversionary activities, which were well attended.

The two communities, Halfway and Burnhill, are very different and have their own strengths and challenges.

In Halfway, one key problem that was identified was a lack of facilities for young people. Healthy ‘n’ Happy’s action was to work with young people on the provision of and access to activities. A group of young people formed a steering group to administer a community budget to enable other young people to conduct projects to tackle the identified needs. One project was the provision of a Youth Café on Friday evenings, in one area, to give young people something to do as an alternative to alcohol. Other actions included: radio skills training and broadcasting; a girls group; and a minibus to take the young people of Halfway to activities.

In Burnhill, there was a focus on hotspots for street drinking and anti-social behaviour, as identified by young people. Thinking Differently staff and young people designed a lantern festival community event that would both represent community clean-ups of litter and repurpose a particular site for a single evening to allow for community-wide discussion about the alcohol issues that had been identified. Community participation in this event led to the redesign and revamp of what was the Burnhill Children’s Action Group to a more relevant and engaging service, the Wee Adventure Club for young children aged 5 to 12 years.

A youth activism group took part in residential research capacity building, provided by the evaluators in Newcastle, and subsequently conducted its own research in the community. It disseminated this by a radio show.

<table>
<thead>
<tr>
<th>Activity</th>
<th>No. of sessions/events</th>
<th>No. of people</th>
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<tbody>
<tr>
<td>Community events</td>
<td>2</td>
<td>180</td>
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<tr>
<td>Door-to-door consultation</td>
<td>-</td>
<td>165</td>
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<tr>
<td>School focus groups</td>
<td>5</td>
<td>-</td>
</tr>
<tr>
<td>Youth steering group</td>
<td>-</td>
<td>10</td>
</tr>
<tr>
<td>Photography (young people)</td>
<td>10</td>
<td>9</td>
</tr>
<tr>
<td>Radio documentary</td>
<td>-</td>
<td>9</td>
</tr>
<tr>
<td>Photography (adults)</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Exhibition of photos</td>
<td>ongoing</td>
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Table 2 Activity in Healthy ‘n’ Happy, Year 1
Table 3 Activity in Healthy ‘n’ Happy, Year 2

<table>
<thead>
<tr>
<th>Activity</th>
<th>No. of sessions/events</th>
<th>No. of people</th>
</tr>
</thead>
<tbody>
<tr>
<td>Photography launch</td>
<td>1</td>
<td>23</td>
</tr>
<tr>
<td>Photography (young people)</td>
<td>5</td>
<td>12</td>
</tr>
<tr>
<td>Photography (adults)</td>
<td>3</td>
<td>6</td>
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<tr>
<td>Exhibition of photos</td>
<td>1</td>
<td>30</td>
</tr>
<tr>
<td>Radio group</td>
<td>9</td>
<td>10</td>
</tr>
<tr>
<td>Youth Café</td>
<td>9</td>
<td>18</td>
</tr>
<tr>
<td>Youth steering group</td>
<td>12</td>
<td>5</td>
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<tr>
<td>Volunteers at Youth Café</td>
<td>6</td>
<td>3</td>
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<tr>
<td>Youth Activist meetings</td>
<td>7</td>
<td>11</td>
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<td>Youth Activist bootcamp</td>
<td>5</td>
<td>8</td>
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<tr>
<td>Youth Activist research trip</td>
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<td>8</td>
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Table 4 Activity in Healthy ‘n’ Happy, Year 3

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<tr>
<th>Activity</th>
<th>No. of sessions/events</th>
<th>No. of people</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive youth activities (incl. Youth Activists, Radio Club)</td>
<td>175</td>
<td>73</td>
</tr>
<tr>
<td>Lantern festival preparation</td>
<td>15</td>
<td>11</td>
</tr>
<tr>
<td>Community events</td>
<td>21</td>
<td>126</td>
</tr>
<tr>
<td>Volunteering (note that these instances supported the delivery of the above activities)</td>
<td>50</td>
<td>6</td>
</tr>
</tbody>
</table>

Understanding differing project models

The descriptions above denote quite different models of action and practice, and make it clear that each project worked in very different ways. MYPAS used traditional groupwork that deliberately encouraged young people to bring friends, and to influence young people’s access to positive peer activities and friendships. YMCA Glenrothes used a range of approaches including groupwork, peer education and community engagement, bringing young people and community members together. Healthy ‘n’ Happy’s model
was to be guided by the needs identified by the community, with the view that tackling the problems identified by the community would indirectly have a positive impact on alcohol misuse. The model facilitated local young people and adults in developing ideas to tackle alcohol harm in their area and to become organised, active and influential.
2 Theory of change evaluation

Aim and research questions

The aim of the evaluation of the Thinking Differently programme was to assess the effectiveness of these projects in reaching their outcomes within the three themes of the Thinking Differently programme: family; peers; and community. The research questions set by the partnership, in collaboration with the evaluators, were:

1. (a) How far is each project achieving its own project outcomes and in what ways?
   (b) How far and how likely are projects to achieve primary outcomes?

2. (a) What factors help or hinder projects to achieve their aims?
   (b) How do changes in awareness, knowledge or behaviour relate to wider peer-, family- and community-level changes?
   (c) What role is played by young people in project design, actions and evaluation?

3. What are the true (or wider) costs of delivering each project? What does this imply about the resources required to deliver each approach?

4. What are the considerations for future practice?

Dealing with complexity

From the inception of the projects, it was clear that an evaluation was needed that could take account of their complexity: indeed, an evaluation that was ‘thinking differently’. Our approach to evaluation was to use a ToC evaluation approach (Laing and Todd 2015; Dyson and Todd, 2010; Connell and Kubisch 1998). ToC is an outcomes-based model that links outcomes and activities, through intermediate impacts, to explain how and why desired change is expected to come about.

Of initial interest to the funding partnership was the establishment of a common outcomes tool to measure alcohol perception or behaviour. We considered various tools that could be used (e.g. Warwick-Edinburgh Mental Well-being scale (WEMWBS), the three question Alcohol Use Disorders Identification Test (AUDIT-C) and the Strengths and Difficulties Questionnaire (SDQ)). It became apparent at the first learning set event that projects were expected to work towards various outcomes, depending on their focus (i.e. peer, family or community). The two primary outcomes were considered to be long-term outcomes, unlikely to show themselves during the lifetime of the project, and this
posed a challenge to the measurement of common outcomes. Furthermore, the positioning of young people involved in projects as potential agents of change in their various communities, rather than as the main group in need of a changed approach to alcohol use, meant that it was inappropriate to measure the alcohol perceptions or behaviour of the young people taking part. We had initially asked the projects to use three questions from the AUDIT-C alcohol-use measure with the groups that they were working with, on the understanding that they may not necessarily be using or misusing alcohol. However, projects had varying levels of success with using AUDIT-C, as young people often resented being asked about alcohol, and it was eventually abandoned.

Several other project characteristics came to light that affected how we were able to evaluate the projects, confirming the flexibility of a ToC approach, including:

- The projects were not expected to be working directly with beneficiaries in all cases, and were working with different kinds of target groups.
- The actions planned were multiple, and were not always known in advance.
- The projects were encouraged by the partnership to be dynamic and flexible, and to adapt to changing circumstances.
- Each project had different outcomes that it expected to work towards.
- The outcomes specified by the partnership were subject to differing interpretation, were not easily measurable and did not relate clearly to each other.
- Each project worked in a different geographical and organisational context.

This level of complexity necessitated a role for the evaluators that was more involved and dynamic than that traditionally expected of scientists in order to keep track and make sense of the changing and shifting nature of the project designs, and an evaluation methodology that could take into account these different contexts.

During 2013–14, we worked with each project to develop a ToC. This included stating the steps of change that would produce the intended outcomes.

To evaluate progress towards the outcomes’ evaluation, plans were put in place that enabled projects to collect evidence on the steps of change towards the outcomes. This enabled reflection on evidence available at any particular time to assess whether the ToC towards outcomes based on project actions were on track, or whether to vary the actions and take a different approach. ToC therefore enabled the tracking of learning about process throughout the three years by reflecting on when the steps needed to be changed to go in a different direction and enabling various data to be collected to reflect
these changes. Specifying the measures in advance would not have been sensitive to these changes.

In order to work with project staff to reflect on whether the ToC towards the outcomes based on project actions were on track, we tried to develop an ethos of partnership and co-production with project staff. We strived to maintain such an ethos at the same time as a critical stance to our own actions, in the evaluation process:

At the same time, it [the theory of change] also allows for failure. I’ve never felt, all the way along, if something has failed or gone wrong [with the project] or we haven’t had anybody turning up, or where there are no outcomes, that that has been seen as a failure, or that’s something that somehow we shouldn’t report – if anything, yes, we have to report it because from that platform you then get guidance and reworking the theory of change model to know how to go forwards. In a way, it’s more of a perfect tool because it allows failure as well as success, and the culture isn’t geared towards failure really (project staff)

It mirrors much more the human experience, which is about adapting as you go along, and this model I think allows for flexibility and adaptation more than others, so in other words, as your outcomes are being discovered and the project is changing, you can actually change it in the theory of change model without having to go back and reinvent it. (project staff)

The second and third year of evaluation consisted largely of data collection to build a portfolio of evidence for each project. The evidence collected was used to consider how far the ToC could be supported or refuted. The projects themselves were extremely proactive in collecting a wide variety of data relating to their work, and the level of evidence would not have been possible without their valuable input.

What’s definitely highlighted to me using the theory of change… is I suppose, the value or the validity of the evidence that you’ve got, because a lot of what was acceptable… was that a photograph was enough to suggest whatever you wanted it to suggest really, and now I look at things and think, well what does that tell you? What does that show? Is this evidence? But in a way, the theory of change goes into a whole – it’s a questioning tool. (project staff)

I think for evaluation, it clicked for me because I think we could actually start to demonstrate impact both on the different strands of activity that were going on in the project, but then also the project as a whole, because you can use that as a process, so it feels like evaluation is starting to become a bit more tangible. (project staff)
Through the involvement of the projects in data collection, we have a wide range of data: reports; observations; reflective diaries; visual data in the form of photographs, artwork, video; audio data in the form of adverts and radio shows; notes and minutes; evaluation sheets; and expenditure data. In addition to the data collected by the projects, the evaluation team has itself continued to collect evidence using a variety of methods: face-to-face and telephone interviews; focus groups; visual methods; observations and questionnaires. A variety of people were included in the evaluation, such as: project staff; young people; community members; parents; volunteers; and those from partner organisations.

This is a final project report to assess how far the overall programme aims have been achieved. Although we collected a large volume and variety of data we did not intend to report this in detail. It was used during the course of the three years to assess the progress of each project’s ToC. For the purposes of this evaluation report we have selected from interview data in order to exemplify and contextualise the main points that we are making.

The complexity outlined above influenced the kind of economic analysis that could be carried out. The partnership had realised that the nature of the expected outcomes made a full cost–benefit analysis impractical. Instead, a cost effectiveness analysis was suggested.¹ In the event, because the outcomes were subject to different interpretations and were therefore not easy to measure in a consistent way, neither was a cost effectiveness analysis possible. Therefore, the partnership agreed that the economic analysis should focus on issues of inputs and costs – that is, on issues connected with resourcing the projects, apart from the actual funding that they received from the partnership. In particular, we decided to explore the time used for project activities. While the time of the project staff could be tracked through project expenditure, we explored the time that was contributed by a variety of actors who were not paid for their contribution. In effect, we were analysing the wider costs of each project. This is an under-explored area of research, and the active cooperation of the projects in providing data allowed us to obtain insights into the range of people contributing to project activities. This information provides valuable guidance on what types of participation would be required to replicate and/or scale up project activities.
3 Setting the context: The research literature

Adolescents in Scotland are among the heaviest drinkers in Europe (Hibbell et al. 2012). Evidence suggests that, despite increases in drinking from 2008 to 2010 in the proportion of pupils who had had a drink in the past week (NHS Scotland, 2012), teenage drinking has decreased, in general, over time. The Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) (Scottish Government 2015) found that reported drinking in the past week has been decreasing since 2002. There has been a decrease in the proportion of 13-year-olds who had ever had an alcoholic drink, from 52 per cent in 2008 to 44 per cent in 2010. This was also the case, although to a lesser degree, for 15-year-olds (82% in 2008 compared with 77% in 2010) (NHS Scotland 2012). In terms of gender differences, 15-year-old girls were slightly more likely than 15-year-old boys to have drunk alcohol in the past week: 19 per cent of 15-year-olds girls had had a drink in the past week, compared with 16 per cent of 15-year-old boys. There was no difference between 13-year-old boys and girls (Scottish Government 2015) (SALSUS). However, it is by no means universal that young people drink. Indeed, many young people choose not to drink, for varied reasons (Herring, Bayley and Hurcombe 2012). Certain social activities such as teen dating is associated with lower alcohol intake (Percy et al. 2011; Seaman and Ikekewuonu 2010). Also, the drinking culture and the associated risks for young people change over time.

It is now well known that young people are much more vulnerable than adults to the adverse effects of alcohol due to a range of physical and psycho-social factors that often interact (Newbury-Birch et al. 2009). The prevention of excessive drinking in young people is a global public health priority (Jernigan 2001). Tackling the harmful effects of alcohol misuse is a central element of the Scottish Government’s public health policy. 2009 saw the creation of an action framework designed to address the harmful effects of alcohol misuse (Scottish Government 2009). This framework highlighted the impact on children and young people, and encouraged interventions that address key outcomes: reduced consumption; supporting families and communities; positive attitudes, positive choices; and improved support and treatment. This framework was evaluated using a ToC methodology (NHS Health Scotland 2011). The framework led to the establishment of the Scottish Youth Commission on Alcohol and resulted in a range of recommendations. These centre on education and raising awareness, changing the culture of drinking, the accessibility and availability of alcohol, marketing strategies, personal safety and providing emotional support for young people (Young Scot 2010).
In 2009, the Chief Medical Officer for England provided recommendations on alcohol consumption in young people (Donaldson 2009), based on an evidence review of the risks and harms of alcohol to young people (Newbury-Birch et al. 2009). It has been argued that these guidelines may be unrealistic, as drinking alcohol is a taken-for-granted part of many families’ everyday lives and, as such, the advice could problematise sensible parents’ approaches to alcohol (Valentine et al. 2010). Also, it is not clear whether health messages should focus on alcohol alone, other things such as new psychoactive substances/NPS or a more general message about health, of which alcohol consumption is a part. Indeed, given the heterogeneity in approaches to alcohol among different young people, the efficacy of a single health promotion message for young people may be questioned (Sondhi 2012).

Parents are one of the most important influences on young children’s attitudes towards drinking (Bremnar et al. 2011; Sondhi and Turner 2011; Sondhi 2012; Valentine et al. 2010; Velleman 2009). Parenting style and ‘good’ family relationships have been demonstrated to have a positive effect on young people’s drinking behaviour, regardless of family structure or whether parents consume alcohol (Newbury-Birch et al. 2009). Both excessively authoritarian and permissive parenting styles are associated with an earlier onset of alcohol use and higher levels of drinking behaviour (Moore et al. 2010). Although family influence is strongest at an early age, there is evidence of ongoing influence among young adults. It has been suggested that good family relationships, positive community connections and alcohol risk awareness in parents and young people can enable children to develop a resilience to the harmful effects of alcohol (Newbury-Birch et al. 2009; Bancroft et al. 2004).

The majority of parents are aware that their children are drinking (Morleo et al. 2013), but it is likely that the full extent of the drinking will not be known (Percy et al. 2011). It has been shown that it is at home and with parents that many young people ‘learn’ to drink (Valentine 2007). Parents can also be a primary source of the supply of alcohol to young people (Elliott et al. 2011). This may be through the provision of money, by having alcohol available or by purchasing alcohol for young people directly. Direct purchase of alcohol from a shop by young people was rare (SALSUS).

Evidence that the family is influential in young people’s drinking behaviour has led to interest in involving the family in interventions that would otherwise be focused solely on young people (Valentine et al. 2010; Velleman 2009). The rationale of such interventions is to address a lack of information (i.e. understanding of effects on health) or incorrect understandings of social norms (i.e. beliefs about the incidence of drinking of different ages and groups) (Sondhi 2012). For example, that some learning often takes place at home about the safety of drinking suggests an opportunity in the home to teach children
about other drinking practices and environments, and the impact of drunken behaviour on others (Valentine et al. 2010). However, evidence of the role that parents play on young people’s drinking does not necessarily lead in any simple manner to appropriate interventions. Bremnar et al. (2011) suggest that family influence ‘ranges from the point at which alcohol is introduced, to exposure to adult drinking and drunkenness, to the amount of supervision placed on a young person (such as knowing where their child is on a Saturday evening or how many evenings their child spends with friends)’ (Bremnar et al. 2011: 1). This might suggest varied opportunities to influence children’s drinking that might, in turn, be influenced by interventions. They suggest critical points at which a carefully timed intervention could generate a positive outcome by reducing the likelihood that a young person will drink frequently and to excess. However, Percy et al. (2011) suggest that parental attempts to restrict their teenager’s contact with alcohol seldom lead to a reduction in drinking. On some occasions, parental actions actually increase the risk of young people getting drunk. Seaman et al. (2010) suggest that it was the witnessing of examples of moderation (p.5) within young people’s wider social networks, rather than being introduced to alcohol at home, that is important to young people (Seaman and Ikegwuonu 2010). This suggests that the possible importance of the wider social norms of drinking experienced by young people in their communities. The finding that parents tend to rely on their own childhood experiences with alcohol and personal beliefs, rather than governmental public health messages (Sondhi and Turner 2011), might suggest interventions that focus on personal beliefs rather than governmental messages about safe drinking. To summarise, therefore, although there is now a reasonable body of research on the nuanced role of parents (Bremnar et al. 2011; Sondhi and Turner 2011; Sondhi 2012; Valentine et al. 2010; Velleman 2009), we may still not know enough to plan effective interventions.

Percy et al. (2011) suggest that young people are sophisticated consumers, making complex judgements about the volume, type and pace of their consumption. This does not necessarily mean that they are always well informed about the health impacts or that, if they were, such knowledge impacted on their behaviour. Among both 13-year-olds and 15-year-olds, the most common negative consequence was doing something that they regretted, or vomiting (Scottish Government 2015). Less than half of 13-year-olds (40%) thought that it was ‘OK’ for someone of their age to try drinking alcohol, while nearly three-quarters of 15-year-olds (73%) thought it was ‘OK’ (Scottish Government 2015). Less than one in ten 13-year-olds (9%) thought that it was ‘OK’ for someone of their age to try getting drunk, whereas 38 per cent of 15-year-olds thought that it was ‘OK’.

Central to the complex decision-making of young people about their drinking is relationships with peers (Bremnar et al. 2011; Percy et al. 2011; Seaman and
Ikegwuonu 2010; Sondhi and Turner 2011). For some young people, excessive alcohol use is one of the few ways in which they can socialise with others of their age group (Seaman and Ikegwuonu 2010). Friendship group members seem to be active in the construction of the drinking culture. The stigma among teenagers of a failure to handle drink seems to lead to peer efforts to look after and protect the individual. This culture seems to include ‘shared traditions, knowledge, expectations and goals, [including....] what to buy, how much to buy and where to consume it’ (Percy et al. 2011: 72).

However, young people’s drinking has been found to vary inconsistently with the context and who they are with, and they perceive a normative pathway that involves a reduction in drinking as they mature and take on more responsibility (Percy et al. 2011). There are inequalities in how young adults learn to drink safely, based on socio-economic status. Young people’s drinking patterns change considerably over time, including what is consumed and where (from outside to inside), and such patterns are influenced by the social reasons for drinking. Issues, attitudes and behaviours of 14-year-old drinkers are radically different from those of 16-years-old. Young people might, for example, drink less while dating in teenage years or if part of a sports team (Percy et al. 2011).

There are some interventions that take account of peers as a key influence, notably peer education approaches (Cairns et al. 2011). Peer education has been defined as ‘the teaching or sharing of health information, values and behaviours between individuals with shared characteristics’ (Strange et al. 2006). A systematic review of the literature carried out in 2015 investigated the effect of peer-led interventions on reducing substance use (including alcohol) among young people aged 11 to 21 years. The pooling of six studies (from the 17 included in the review), representing 1,699 individuals in 66 schools, demonstrated that peer-led interventions are also associated with benefit in relation to alcohol use. The authors concluded that peer interventions may be effective in reducing/preventing alcohol use (MacArthur et al. 2015).

Certainly, the varied approach over time to drinking among different groups and of young people suggests the need for a much-nuanced approach to interventions, taking account of these differences and changes. The evidence suggests the need for approaches that take into account young people as agentic and making reasoned, although not necessarily always reasonable, decisions. As pointed out by Percy et al. (2011), an alcohol purchasing strategy aimed at preventing or delaying drinking, as are most current interventions, is of no use in reducing the potential harm of alcohol for the many young people who start drinking before legally entitled to buy it. Young people were most likely to obtain alcohol not only from home but from a friend or relative (Scottish Government 2015). This also suggests the need to consider the wider community in addressing alcohol misuse.
There may be a need to use the media better in alcohol interventions with young people (Velleman 2009). However, there is evidence that young people reject simplistic messages, such as not to follow celebrity culture (Atkinson et al. 2011). Indeed, parents’ and friends’ attitudes and behaviours are better predictors of young people’s alcohol use. The authors conclude that the media can help to set ‘healthy’ norms for drinking behaviour. However, it is likely that policies to tackle media representations of alcohol should be part of wider strategies involving families, friends and media professionals (Atkinson et al. 2011). Other studies have pointed to the need for more innovative approaches, such as the recent ‘drinking mirror’ smartphone app and the trialling of apps for young people in accident and emergency settings (Deluca et al. 2015).

In summary, a number of important findings emerge for this study. First, the risks of teenage drinking are real. Young people do engage in risky behaviours when drunk, and the outcomes of these actions can be severe. However, drinking behaviour changes over time, often in the direction of reducing the risks as young people learn to moderate their consumption. Second, although the role of parents and peers is highly influential in drinking culture and individual behaviour, the implications for interventions is not straightforward. The complex, changing and inconsistent nature of teenage drinking cultures makes interventions difficult to plan. Third, young people appear to be making complex (and not always safe) judgements, and are likely to start at an earlier age than adult carers believe. It is argued, therefore, that intervention approaches are needed that recognise young people as relatively sophisticated decision-makers, rather than requiring simplistic health messages. That judgements are made in a range of social contexts suggests a need for relational interventions, rather than messages aimed at the individual.

In June 2012, the Thinking Differently – Young People and Alcohol partnership was launched to trial innovative, preventative interventions designed to reduce alcohol-related harm in Scotland. This programme recognises the more nuanced role of parents, peers, mentors and the community in young people’s decision-making about alcohol consumption. This has been an ambitious project. Thinking Differently projects are seeking to address the underlying societal causes of drinking rather than the symptoms, and aim for wider cultural change. The idea of Thinking Differently was to do this by increasing community capacity (in terms of young people, parents and the wider community) to begin to address issues of alcohol misuse in their areas. It was to build on what young people are already doing, and the importance and complexity of friendship group decision-making and of the influence of family. Rather than a didactic parent–child relationship about alcohol consumption, parents are seen to be interacting with their children through negotiation, debate and a series of strategies.
The projects of Thinking Differently recognise the role that parents play in the decision-making process, and that this process is further influenced by peer or friendship networks and the community. Thus, the three projects of Thinking Differently each focus on a different theme: families and young people; young people and peers; and communities.
4 Project outcomes and how they were achieved

Three projects were carried out over three years in different organisations: MYPAS in Midlothian focused on peers; YMCA Glenrothes focused on parents; and Healthy ‘n’ Happy in Rutherglen and Cambuslang worked with young people in the community. There was convincing evidence at the end of three years that all projects had been able to build practical, sustainable skills and knowledge to empower young people, parents/carers and the community to take action to address alcohol concerns (PO2). There was also evidence that each project achieved one or more of its own project outcomes.

This chapter looks at how far each project achieved its intended outcomes and how. Finally, the evidence on whether the Thinking Differently programme outcomes were achieved is considered.

Theme: Young people and peers

Young people and peers formed a particular focus of the MYPAS project. However, the nature of the Thinking Differently programme is that this is true of all the projects, and it is interesting to note that, in YMCA Glenrothes, the Young Educators programme had the specific aim of enabling young people to influence others, including peers.

Considering MYPAS first, the focus was on groupwork that deliberately encouraged young people to bring friends to influence young people’s access to positive peer activities and friendships. MYPAS had four specific outcomes to work towards (see p.10) and a clear ToC that identified short- and medium-term changes (see Annexe 1). For those young people who engaged with the groupwork, there is evidence that they enjoyed it and were actively involved in discussion.

Young people, parents and staff reported that they have gained skills and increased confidence:

\[
\text{at first when I came I was a bit shy and once I got to know people I was confident. (young person)}
\]

Observation of groupwork showed that most young people could ask for help if needed and put their point of view across clearly, willing to try new things. Both staff and parents noted improvements for these young people:

\[
\text{Think [my daughter] has got a bit more positive about herself and a bit better self-esteem. (parent)}
\]
She enjoys the group and I feel it has helped boost her confidence and self-esteem. (parent)

There was also some evidence suggesting an increase in knowledge about the harmful effects of alcohol, as well as some evidence of knowledge of risky behaviours and the consequences of such behaviour. This led to a consideration of how young people could keep themselves safe, and a change in thinking for some young people:

I used to think the police were all out to get us and want to pick on us, but now I think they might help us. (young person)

Well, know if I had a drink then or my friends were drinking then it would be better to stay with a group than go by yourself and not to have too much alcohol and make sure you are always with someone. (young person)

Some young people felt they were in a much better position to be able to help their peers because of how their thinking had changed:

Aye, it has changed us about alcohol, 'cos kids our age, they do drink and smoke and do drugs, quite serious drugs actually, just stuff like that, but now I have learned what they actually do and the effects of them and what the alcohol does to your body, it has made me realise how serious it really is. (young person)

There was evidence of risky or unsafe behaviour by the young people involved in groupwork, and the desire of those young people to regulate or stop those behaviours. Some young people told project staff that they had moderated their drinking:

I’m not drinking as much as I used to. Only occasionally and I try and think about what and how much I am drinking. (young person)

I’m making change; it is hard but I am getting there. I know I just need to get on with it. I’ve cut down but know I need to do more and would like help with it. (young person)

However, there is little evidence about whether any changes were sustained by those young people. One young man, a heavy cannabis user, expressed his desire to stop, yet did not believe himself that he could stop and felt it was too hard. Another young man told us that he wanted to change:

Well, I only joined that group so that I could change the person who I am. I want to be a different person. Now, I want my heed down. I want a good career. I want a good life ahead of me. Now, I’m starting to realise all my consequences. (young person)
One social worker whom we spoke to emphasised the importance of the group, and particularly the relationships built up with the staff, in helping one young girl to cope with being looked after. Young people spoke positively about the importance of knowing that there are people there for them, and how the project enabled young people to support and talk to others. During an interview with a researcher, one young person expressed a desire to help other young people:

I would love to come back and help and help to run and show... you would be the same age as what you were teaching them, so you would know how to get through to them ‘cos they are more your age and you can speak to them and that, so I think it would be a good thing if a couple of us come back to help. (young person)

While there were positive statements made by young people about mentoring other group participants, there were also negative comments about the possibility of being able positively to influence other young people from drinking in the evenings. One group felt that it was impossible to do anything about large-scale drinking in the area, as many young people just would not be interested in a project such as Thinking Differently.

**In summary**

In MYPAS, work with individual young people was successful in enhancing the awareness and knowledge of young people about alcohol and the consequences of risky behaviour. Given that young people showed evidence of developing awareness and knowledge of alcohol harms, other health-related concerns and more confidence generally, it seems likely that peer relationships in the groups, when they were working well, contributed positively towards this development. We have no firm evidence that these outcomes have been extended to changing young people’s behaviour.

There was evidence that young people, as a result of the groupwork, may be in a better position to help their peers, but there was no evidence of the development, as a result of this project, of protective peer networks that would support harm reduction. On the other hand, we cannot say that looking to young people to influence the behaviour of peer networks does not work. We observe that, in the model adopted by MYPAS, this did not happen, but this is not to say that such peer influence could not happen with the same model, given more time, different circumstances or a different model.

**Learning about peers from the other projects**

In YMCA Glenrothes, one of the models used was peer education, with a programme that evolved over the three years to be a significant resource for young people and schools. The intention is to continue. The Young Educators programmes demonstrated the ability of young people to design the sessions that they would use with their peers, their
influence on peers in terms of increased awareness of alcohol harms and their ability to talk about drinking. There was evidence that when young people were in the role of peer educators they were able to produce and convey a range of messages about drinking behaviour that were well received. Evidence is limited as to whether this has, or may yet, lead to behaviour change. One of the peer educators told us of the impact that he thought the peer education had had on the young people whom he worked with:

*It was good when we did our mind maps as well, because they really just did have a lot picked up from it. Because it was just on a mind map and you had to write one thing that they’d learned, and everyone had one thing straight away, at least. They were like, ‘oh, oh’. (peer educator)*

Healthy ’n’ Happy used an activist model of youth engagement, with young people being directly engaged with the community and taking a leadership role in the direction of that engagement, as a distinct move away from peer mentoring/education. Friendships were an understated but nevertheless important aspect. The emergence of the Young Activists programme provides some evidence that young people were trying to influence their peers and the community by means of radio shows. Healthy ’n’ Happy also engaged young people in commissioning processes, guiding their peers to produce well-evidenced bids for funding to tackle alcohol issues.
Box 2 Focus on: Glenrothes Young Educators

Glenrothes has worked in partnership with NHS Fife, schools, and other drug and alcohol agencies to recruit and train several cohorts of peer educators of secondary-school age. Training consisted of learning about alcohol and facilitation skills. The Young Educators then designed and delivered sessions for younger children, focusing on attitudes to alcohol and staying safe. Evaluation with these younger children who took part showed that the vast majority had enjoyed the experience and learned something new about alcohol and its possible effects. The Young Educators themselves reported improved knowledge and awareness of alcohol and greater confidence, and really enjoyed delivering to other young people and receiving positive feedback from them:

“This whole experience, I had the biggest, reddest smiley face on this side of the planet. And I felt like this because I really liked the evaluation when we had the feedback from the children, because obviously had any of this had an impact.” (young person)

A partner from a local agency collaborating with Glenrothes and working with the Young Educators explained:

“As well as increasing their knowledge around substance misuse and why, it was also increasing their ability in life skills, that’s a good way of putting it, the confidence with speaking with people for the first time. I thought the way they engaged with their peers was just incredible. It was one of the best bits of work I’ve been involved with in a long time.” (partner staff)
Summary

Peer relationships in various forms of groupwork contributed positively to the development of knowledge, skills and confidence in thinking and talking about the dangers of drinking. There was evidence that young people were in a better position to help their peers as a result of Thinking Differently. There was some evidence of behaviour change in some circumstances (e.g. attending diversionary activities). However, there was no evidence of the development, as a result of this project, of protective peer networks that would support harm reduction.

Various models of peer involvement were developed in keeping with the different styles of the projects, yet all had some success in engaging peers: in MYPAS, the focus was groupwork; in YMCA Glenrothes, the main model was peer education; and in Healthy ‘n’ Happy, the model was an activist model of youth engagement. What also came across from all three projects was young people’s interest in and motivation for helping other young people (including when some of those young people who were wanting to do the helping were themselves positioned by workers as needing support). It may be that a peer education model, akin to what has been tried in YMCA Glenrothes and which is being planned by MYPAS, may be a promising way forward. Youth activism is also emerging as a promising model.

Theme: Parents and families

Box 3 Focus on: Rutherglen & Cambuslang community budget and Youth Café

By consulting with the community, several issues came up that local residents wanted to be tackled. One was litter and another was the lack of things for young people to do in the area. Litter-picks were arranged by young people to tidy up the community.

A group of young people attended a residential course where they learned how to become commissioners in order to run a ‘Dragon’s Den’ style process to allocate a community budget to tackle alcohol misuse. Young people were invited to bid for money from this budget, but needed to prove that their idea would prevent alcohol misuse. The young commissioners decided to fund a Youth Café and a local disco. The Youth Café ran for several months as a positive diversionary activity, and young people gave up their time as volunteers to help out. The young commissioners gained skills from this process, as one youth worker explained:

It was more about empowerment and upskilling of the young people to be able to go ahead, and then effectively and democratically and fairly give out this money (youth worker)
The YMCA Glenrothes project was expected to work towards outcomes related to families (see page 12), and detailed the steps by which it intended to achieve this in its ToC (see Annexe 1). YMCA Glenrothes is skilled in working with a variety of young people to create key messages that are intended to stimulate discussion with adults. A wide range of messages were produced in many different media, including film, songwriting, animation, radio adverts and art. The process of creating them was powerful for the young people. Young people challenged adults' use of alcohol and the idea that adults can give unbiased advice, stating that they were giving 'mixed messages' or 'confusing messages', were 'contradicting themselves' or were 'hypocrites.' Different cultures of parenting were also apparent. Young people challenged those in authority who were responsible for powerful discourses:

*I don’t think it helps that the government is telling teenagers and stuff not to drink and stuff, and they have TV shows that glorify drinking...*  
(young person)

Young people in YMCA Glenrothes had suggested that, if parents and other adults would listen to them, they might be challenged to think more deeply about their own alcohol use. Young people wanted to challenge discourses that placed alcohol misuse problems on young people, to expose the pervasiveness of alcohol in society and challenge community norms. Messages were shared with parents during a few events, including a World Café, radio broadcasts, youth information points and parents evenings. By sharing these key messages, it was theorised that people would begin to think and talk differently about alcohol.

Unfortunately, there was little evidence of improved family understanding or confidence in influencing young people, or increased understanding about families own alcohol use. Young people themselves were not always optimistic about whether they could influence the behaviour of others. While there is evidence of young people being more informed about alcohol, there is also evidence from some young people that they do not necessarily feel optimistic about change:

*If you are a certain way it’s hard to change that mind set, because it's the path you are in...*  
(young person)

A World Café event (bringing parents, children and local practitioners together to talk about alcohol) was well attended. The feedback highlighted the intergenerational conversations that took place and demonstrated that, for some parents, there had been an increase in knowledge and awareness of alcohol. Some families found the World Café a powerful experience. It was possible that more parents did take messages to heart, but there was a lack of available staffing to follow up those who attended or to hold follow-up events.
Given the difficulties of engaging parents (see, e.g. Siraj-Blatchford and Siraj-Blatchford 2010; Crozier and Davies 2007), this event proved highly successful. How far the results of this event were down to the key messages produced by young people or the direct input of project staff delivering alcohol awareness activities at the event is difficult to gauge. There was evidence that 12 parents accessed alcohol support as a result of hearing the youth-produced advert on drinking and family life, and six young people who were involved had since discussed alcohol within their families. Participants involved in the advert commented on how friends and family members recognised their voices, which sparked further discussions both on how they had become involved and on local alcohol use, resulting in 18 telephone enquiries from members of the public seeking help with alcohol-related issues.

The lack of impact on families of young people’s messages led to a refocusing of the project, and more direct work with parents was carried out during Year 2. One group that was influenced by the messages was of those who identified both as young people and as parents. As a result, there was some evidence of changes in the knowledge and understanding that parents have about alcohol. The young parents involved discussed their own relationships with alcohol and the consequences of this for their children in the future, and broadened this to think about the messages that they could give to other parents. The group developed adverts that were aired on local radio, which were aimed at other parents such as them. One said:

*I have never thought of everyone else’s use of alcohol before. You tend to think of your drinking in your wee world but, when you stop, you think differently.* (young parent)

Being part of the group had not only enabled these young parents to think about their relationship with alcohol and how they would talk to their children about it, but had helped them more generally to develop their confidence:

*I think everyone’s got a lot out of it. It’s kind of like life changing for everything that they do for us. Yeah, because it helps when people have got anxiety and stuff. If you can come over, I’m not saying it cures it, but if you can come over your fear of it then it is changing your life. It’s something you’re doing that you wouldn’t have done.* (young parent)

The young parents valued the relationships built up with other parents and staff. Almost all had new ways of talking about alcohol and many more had gained the confidence to challenge and discuss drinking attitudes. Teen parents are being supported to run events for peers. A longer-running group was thought to be needed.
There was no significant parental element in the other two projects. Parents had knowledge of the activities of MYPAS as part of young people joining the groups, but they were not included in the focus of the groupwork, while in Healthy ‘n’ Happy parents were involved as community members in project activities.

**In summary**

Although there is some evidence that the messages about drinking that were created by young people were received by parents, there is only limited evidence that this led to increased family discussion about drinking or changes in perceptions, knowledge or actions. It is possible that some parents did take messages to heart, but a lack of available staffing meant few follow-up events. Nevertheless, there is no evidence that this theory works; that is, that young people can be agents of change for parents to improve the culture of drinking. We have only limited evidence that parents saw the messages of young people as relevant to their own relationship with alcohol or that there was more communication in families about alcohol because of these key messages. There is no evidence of improved family understanding about or confidence in influencing young people, or increased understanding about family alcohol use.

It proved more successful to work directly with parents on a varied programme of learning in which alcohol is one of the many components. This happened in the second year. The main group involved was a teen parent group, and discussions about alcohol were integrated into the wider theme of health. There was evidence of new ways of talking about alcohol, and more confidence to challenge and discuss drinking attitudes.

Although YMCA Glenrothes changed the direction of its model to try to deliver information directly to parents, tensions arose around what kinds of information were needed. A perceived lack of consistency in the messages from policy and research meant that there was no clarity about whether the messages that the young people were developing were the right ones. To try to meet the project outcomes for families, YMCA Glenrothes focused on working with teen parents to enable them to become Community Champions and spread broad health messages to other young parents. It was thought that, by including alcohol within a broader healthy living message, the messages would be seen as more relevant to young parents and influence how they interact with their own children about alcohol in the future. So far, this model is untested, but work is ongoing.

We know that YMCA Glenrothes was particularly effective in engaging partners to work with the project, which enabled work with a large number and range of young people. We suspect from the experience of YMCA Glenrothes that ‘thinking differently’ in dealing with families is best achieved by working with organisations that are experienced in working directly with parents, rather than by trying to influence them through their
children. Indeed, those on the project feel that, in order to increase parent/carer capacity, more work needs to be done both to encourage intergenerational dialogue and to work more directly with parents. YMCA Glenrothes staff have also suggested that parents might be more effectively engaged if there is a broad well-being agenda at sessions, rather than focusing on alcohol.

**Box 4 Focus on: Glenrothes World Café**

As a way of bringing parents and young people together, a large event was planned at a local venue, following on from an award ceremony for young people to which parents were invited. Young people helped to plan and deliver the event. Several stalls gave out information on local services for children and families. The artwork containing messages about alcohol that young people had produced were on display. Several activities were planned, including quizzes and flash cards, to stimulate discussion about alcohol. Groups could decide which activities to undertake.

Evaluation forms completed after the World Café event by some adults emphasised that they felt that they had changed their views about alcohol:

- *It made me more aware of the underlying messages we are sending out to our children.* (parent)
- *My views on alcohol are still the same, but it has made me more aware.* (parent)

For some parents, it was the first time that they had spoken about alcohol with their children, and one father told us that it was quite an emotional event for him, as he had struggled with alcohol misuse for a long time but had not known before how to raise it with his child.

**Theme: Young people in communities**

Healthy ‘n’ Happy in Rutherglen and Cambuslang, an organisation skilled in working with communities around health issues, worked in two communities during the lifetime of the project. The organisation was clear that the project direction (see Theory of Change, Annexe 1) was to be guided by the needs identified by the community, with the view that tackling the problems identified by the community would indirectly have a positive impact on alcohol misuse.

At the end of the first year, after reviewing the learning from Year 1, another ToC was developed. The initial ToC framework was activity based and, when looking at the project progress, it did not reflect the pathway that the individuals were progressing along (becoming more personally and politically engaged). This prompted a redesign of the ToC to reflect the pathway/process of those involved, rather than activities. Additionally, when assessing the scope, scale and achievability of the project, it was agreed that Healthy ‘n’ Happy should further streamline the ToC to ensure that the core focus of the project work was with young people, their journey and their development as activists; and the resulting contribution to the local community (two strands of the redrafted ToC, instead of three).
Healthy ‘n’ Happy during Year 1 successfully engaged some people in the first community. It conducted a community consultation involving more than 150 people and held a family fun day that was attended by approximately a hundred people. A small number of residents took part in a photography project. Through this engagement with the community, residents were enabled to identify issues that they felt needed to be tackled in their area, such as litter and the lack of facilities for young people. Young people were then supported to work on effecting a change in these concerns. To this end, young people organised and took part in two community clean-ups to address litter and assisted in running a Youth Café on Friday evenings to give young people something to do. The Youth Café has been seen as a diversionary activity. Prior to Thinking Differently, there was little on offer for young people. Any community activities were adult led and largely unwelcoming of young people:

One of the biggest challenges is the intergenerational dilemma that they have. There’s a lot of youth disorders in the area as well, and there has been for a very long time, and obviously the older generation don’t like it, because that’s where they’ve got to live as well. So unfortunately most of them, when they see these young people, they just immediately get their backs up and think they’re going to be up to no good. (project partner)

Young people did not have spaces or venues at which they were welcome. Although some adults in the community had the best intentions for young people, it is only now that there is starting to be some communication between adults and young people, and young people are gaining confidence in speaking out:

And she said to me, ‘Six months ago I would never have stood up in front of people and tried to argue my political opinion or say any particular strong statement, but since I’ve been part of the steering group, and stuff like that, I mean, we do this all the time, I like doing stuff like this.’ (youth staff)

I think we’re more confident, because I know, for myself, I would not have gone up and done presentations and things anywhere, and now I feel like I can. (young person)

The community development approach by the project facilitates young people and other residents being more active in their communities. The theory is that if more intergenerational dialogue and opportunities for participation are created then, by using the community budget to fund solutions to the problems identified by communities, eventually alcohol incidents will be reduced. The project is starting to see small changes.
One project worker managed to divert a group of young people to a swimming activity when they had intended instead to take drugs in the local park:

*On our way to the swimming I asked what the group would have been up to that night if I hadn’t taken them away and they replied, ‘sitting in the woods getting stoned’. (project staff)*

**In summary**

The engagement of the local community was achieved, as was the contribution of young people to positive activities in the community. The focus of some of the activity was on alcohol concerns, and there was evidence of some impact on these in terms of discussion about alcohol culture and the temporary repurposing of an area often used for drinking. There was no evidence of any impact on alcohol-related incidents within the community.

In order to reach community outcomes, this project took a long-term approach that was aimed at creating community capacity to identify and address change. This kind of model does not produce the kinds of ‘quick wins’ that are seen in targeted work with individuals, and the theory works on the assumption that problems with alcohol stem from more complex issues within the community, such as poverty, access to resources, and historical local cultures of attitudes and behaviours. The evidence suggests that this was a successful project that achieved many of the steps of change that it set out to achieve in the area of South Lanarkshire that was the primary focus.

However, many external factors constituted risks to the project and hampered progress: limited staffing dedicated to the project; the reputational risk to other work by this same organisation going on in the area, which was not well received; the lack of facilities in the area; and attitudes towards young people. This leads us to conclude that we cannot definitively say that this model does not work, yet neither do we have enough evidence to say that it does. We can say that project actions during the timescale of the commissioning have not yet led to sustainable changes in this context. However, we can also say that there is some evidence (from the steps outlined in the ToC) that, given time, the community outcomes may well have been reached.

The evidence base for the links between children’s and young people’s outcomes and the context in which they live are strong, although less is known about their mechanisms. Place is something that matters to children in a multitude of different ways, and initiatives that can tackle the multiple issues experienced by children and young people in their communities, families and schools have a better chance of success than single-issue interventions (Dyson, Kerr and Wellings 2013).
Meeting the primary outcomes

All projects have strong evidence that they have achieved PO2; that is, they built practical, sustainable skills and knowledge to empower young people, families and the community to take action to address local alcohol concerns. The emergence of Youth Activist groups in MYPAS, and Healthy ‘n’ Happy, and the Young Educators group in YMCA Glenrothes provides much of the evidence of the potential of young people to be agents of change. What is yet unknown, however, is how far this can be associated with a behaviour change that can reduce alcohol-related harm and associated risky behaviour by young people. There is less evidence about to what extent parents/carers and the wider community have been empowered to stimulate change. In some ways, this may reflect the knowledge, capacity and skills of the organisations and the staff working for them, which were largely centred on work with young people.

To date, there is no evidence in the communities served by any of the projects as a result of the projects that there has been any reduction in alcohol-related risky behaviour and alcohol harm by young people (PO1). This is not surprising, and it is not to say that there has not been progress in this respect. Measurement of progress on PO1 has always been understood in terms of indicative evidence from the steps of change that led to PO1. A decision was taken early in the initiative not to measure PO1 in terms of the alcohol use of the young people engaging with the projects, since it was never their alcohol intake that was the focus of PO1. Indeed, the ToC from project outcomes to finding evidence of primary outcomes was believed unlikely to be straightforward.

Attention needs to be given to questions such as which ‘young people’ are being referred to in PO1 and, therefore, whose ‘harm’ and which ‘behaviour’ are measured. This is, in part, primarily because the philosophy of Thinking Differently has been not to see the young people who are involved in the project as the main group in need of a changed approach to alcohol use but as potential agents of change in their various communities. Looking at the steps of change leading to PO1 in all ToCs, we can make only some tentative statements about PO1, yet there is evidence for the development of more reasoned and informed attitudes to alcohol in each project.

For Thinking Differently to have had a chance of success, it relied, by definition, on empowering communities, in the widest sense, to address their problems with alcohol. Nevertheless, having the outcomes set by the partnership (as the commissioner of the projects) led to an inherent tension, as staff were mindful of steering the project to meet those outcomes while trying to follow the direction in which the community wanted to go. In this sense, the model highlights that PO1 and PO2 (building skills and knowledge to empower young people, families and the community to take action in relation to local alcohol concerns) are not natural bedfellows and may be at odds.
5 Barriers and facilitators: What factors help or hinder projects to achieve their aims?

Projects were situated in a context-specific place and carried out by a particular organisation. Each had particular outcomes to achieve and used diverse methods. Nevertheless, projects were tasked with ‘thinking differently’ about how what is often termed a ‘wicked’ problem (Rittel and Webber 1973), such as alcohol misuse and its associated risky and anti-social behaviour, could be tackled. Learning from the three projects, we can draw together some of the key barriers and facilitators that were faced when implementing these new approaches, and the ways of thinking in the organisations and areas.

Context: Geographical and organisational

The context in which each project operated was of key importance to how they worked and what was possible. Context refers to several systems that impacted on the projects’ ability to achieve their outcomes in the ways desired, ranging from macro to micro influences: geographical; organisational; local youth cultures; local service provision cultures; and professional cultures. These often interacted.

The geographical context in which a project took place posed different opportunities and challenges. One aspect of this is that the projects relied on partners in different ways. For example, in Rutherglen and Cambuslang a lack of suitable venues for conducting activities with young people was compounded by what seemed to be negative attitudes by local people and professionals to young people, which meant that schools were not always made available:

> It’s quite hard in [the area] as well because we don’t have any kind of building to use that you can actually engage and take the kids somewhere, so it is quite a hard area to get in and engage for somewhere else to take them to. (youth worker)

At the beginning of the involvement of Healthy ‘n’ Happy in the area, there were few professionals in the area who were working with young people in Halfway, specifically as youth agencies were focused on delivery in the wider Cambuslang area. In Burnhill, there was the opposite situation, as all the youth providers were involved in regular delivery of activities. Despite the differences in each area, progressing Thinking Differently developments in both areas required multi-agency communication and
planning to ensure that resources were maximised and duplication minimised. Healthy ‘n’ Happy also faced the unique situation of being an all-age agency that delivered some activities for young people, working alongside agencies that have youth provision as their sole focus. This always creates some challenges when working to establish roles and responsibilities in local delivery. Despite challenges, good progress was made as part of the Thinking Differently project in both Halfway and Burnhill. Healthy ‘n’ Happy brought Universal Connections and Regen FX together as a quarterly multi-agency planning forum to ensure the best use of resources/time and consistency when engaging with the local community and young people. For Halfway, a timetable was created and each agency outlined what it could provide on particular days, and identified opportunities where it could partner on activities. All youth services partnered with Healthy ‘n’ Happy on the Youth Café project (Halfway) and Universal Connections partnered on local delivery of a radio project and other event based activities (lantern festival, etc.) in Burnhill.

YMCA Glenrothes had a long history of collaborative working, and the project was guided by a steering group of local practitioners, including local councillors and representatives of other agencies, meaning that co-working was facilitated and contact made more quickly with young people and parents. YMCA Glenrothes, therefore, has Thinking Differently embedded in a wider provision of health-based activities, and has been able to utilise resources from partners who share similar aims and agendas. That has meant that Thinking Differently is more visibly accountable to those partners for its work, but using the ToC has prevented the drift that might otherwise have occurred, given so many partner expectations.

For MYPAS, local practitioners were used to making referrals based on an identified need for drug and alcohol services, and took some time to make sense of the different work being undertaken through the Thinking Differently project. Some agencies struggled to understand what an ‘alcohol’ project was about if they could not refer their young people with alcohol problems:

As soon as we mentioned alcohol, the intermediaries, the partner organisations, immediately think of young people who are starting to develop patterns or problematic patterns of alcohol use. And I suppose this is where we have had to be pretty careful in terms of how we put it across to them, and if we mention alcohol at all, then that’s what is going to stick in their minds. (project staff)

There was a perception in the projects that engagement very much depended on the ethos of the agencies that they were engaging with. Partners have different expectations and ways of working that need to be respected and negotiated. Schools, for example,
were initially hard to engage. All the projects felt that the schools had ‘cherry picked’ the students to take part in Thinking Differently. YMCA Glenrothes found that the local schools were giving the project access to certain targeted groups rather than diverse samples of young people. Several conversations had to be held and a relationship of trust established before the schools became useful partners.

MYPAS found that schools did not have the time to engage children and young people properly in the process of referral, and actually had a culture of ‘doing unto’ children rather than working with them. On occasion, referral forms had been filled in for young people without their knowledge. This could lead to difficulties in engaging young people in a positive way. MYPAS referred to schools as ‘intermediaries’ rather than partners, as it was felt that they simply passed young people on rather than working with them in a similar way. Other agencies with a youth work approach were found to be easier to work with in this regard:

*Partly it’s about practice, individual practice, and partly it’s about approaching culture. [The] youth work approach, much more aligned to the way that we would work in terms of meeting up with the young person beforehand, talking it through, not trying to pressurise the young person, explaining that it’s a voluntary thing, emphasising the positives. Schools, I’m generally speaking here, again the staff don’t have a lot of time... everything’s done very quickly... wouldn’t have taken the time to sit down with the young person.* (project staff)

Schools in Rutherglen and Cambuslang had become the best option from a limited source of suitable venues to host activities for young people, and yet even these were not enthusiastic or supportive about enabling the project to access their facilities, on the whole:

*It was nightmarish to try and get them involved. We were going into school after school and just all things like that trying to get them to engage, but it was like, ‘Oh, somebody else. Go away.’* (project partner)

Healthy ‘n’ Happy has developed ways for young people to work with community organisations, and in particular a local community council. It wanted young people to be involved and to set up their own youth council. However, progress towards project outcomes had been restricted due to ensuring the right levels of participation that engage young people. The community council wanted young people to attend their meetings, which would not have necessarily been interesting or relevant for young people (also risked being tokenistic). So, instead, the project utilised processes similar to a youth council at the first residential (also attended by local Halfway residents as volunteers), which defined the idea of a Youth Café as a meaningful diversional activity.
Thinking Differently, learning and the contradictions of commissioned outcomes

Thinking Differently was about how far young people can be facilitated to be agents of change in terms of their peers, parents and the wider community, rather than focusing on young people’s own drinking perceptions and behaviours. These were innovative exploratory projects that would be likely to require new ways of working to be developed over time. Undertaking a new way of working in this way was very much a learning opportunity. A structure was in place to provide support to the projects from one of the partnership members, and regular ‘learning sets’ took place over the three years.

There were tensions inherent in the requirement to think (and therefore act) differently, when it was not clear what this meant, and at the same time to achieve prescribed primary and project outcomes. Although, in some senses, having end outcomes enabled projects to stay focused on what the projects needed to achieve (supported by reviewing the ToC), the outcomes also acted as a barrier to working in a more youth-led, community-focused or flexible way. In Healthy ‘n’ Happy, for example, the focus was on empowering young people to identify sustainable solutions to address their own alcohol problems. After three years it was clear that putting the issue/externally imposed outcomes on young people instead of them being able to define their own issues created tension, as it required the project to move in a certain direction rather than being responsive to the direction that the young people might want to take. Thus, PO1 (a reduction in alcohol-related risky behaviour and alcohol harm by young people) and PO2 (to build practical, sustainable skills and knowledge to empower young people, families and the community to take action to address local alcohol concerns) were not always compatible:

> I suppose I’ve never sat in on the funding steering group as a fly on the wall or anything, but maybe I think that’s where the expectation comes from, for numbers. Whereas we’re able to say, ‘Ten kids didn’t drink tonight, five young people have stopped drinking altogether.’ We’re never going to be able to provide those numbers to that steering group. So, I think that’s maybe hindered the work a little bit, because sometimes we’ve maybe veered off path a bit to try and get that information.

(project staff)

The young people whom the projects were working with described cannabis and new psychoactive substances/NPS as more important issues to them than alcohol – indeed, many young people said that they were not using alcohol at all and saw it as an ‘adult’ problem. In this sense, the specific outcomes around alcohol were not always of interest to them. However, young people did want to make a difference in their communities.
The outcomes, primary and project, were not clearly articulated and were subject to different interpretations:

> I think some of the stuff, for example, the peer positive friend thing, we just suddenly realised that funders, young people, everyone had such a different interpretation of what the hell that meant. (project staff)

This meant that the expectations of the partnership were not always clear to the projects, especially when staff changes introduced yet more interpretations. Projects therefore felt inhibited from taking a truly innovative approach and were inclined to revert to usual practice, and unintended outcomes were ignored or underestimated:

> I think what happens is when you are doing a report for funders, all will be in this position. You fall into the trap of evidencing what you’ve done and the kinds of outcomes that funders like to see. So, numbers are one, because numbers are really easy to say, right, you know, ‘Ten of the kids have stopped drinking alcohol.’ You know, that’s quite dramatic, but actually then you miss a lot of the more nuanced ones. (project staff)

> So being a bit more open and flexible with what the possibilities could be, it’s almost stepping back from it a bit, from our funder hats and our agency hats and just thinking, well what ultimately at the core would we want to see in terms of positive impact and let’s have a conversation with young people to see what could be the most feasible thing that they would be interested in, and the way that they’d like to get involved and do it. (project staff)

Not only were there mixed messages in terms of being youth and community led versus programme and project outcomes: the projects also found mixed or conflicting messages from research, and the policy and practice arenas, about the advice for parents and young people, and how a sensible relationship with alcohol can be encouraged. Indeed, the current evidence base on alcohol use and misuse does not reflect a consistent approach. Drawing on the messages of young people adds to, rather than challenges, this complexity:

> The creation of key messages using a youth-led approach can result in the development of alcohol messages that may not necessarily promote responsible alcohol consumption. Young people are basing their messages on their social norms, which may not always be health conscious or promote responsible consumption. (project staff)

The contradictions between expectations to be innovative and youth and community led and yet work to pre-set outcomes led to mixed messages and uncertainty on what
should be reported and the manner of reporting. There was also a tension between having prescribed outcomes while at the same time being encouraged to experiment and learn.

The organisations were accustomed to strict reporting criteria from funders and commissioners that demanded evidence of actions and outputs in numerical form. So, even when the reports required by the funding partnership and the data negotiated with the evaluation team were less structured, one project found that it could not take advantage of this:

\[\text{It's not easy and I think that’s also about recognising the quality in capturing that sort of qualitative data, and... But I am not sure if [my supervisor] recognises how good that sort of data is sometimes, because [my supervisor] is not into narratives. Like, the first report we did, I had this whole narrative bit about the young person’s journey. [My supervisor] cut them all out. (project staff)}\]

There was a recognition that reporting needed to be about change, and that evidencing this often needed a more qualitative, nuanced approach:

\[\text{But that, to me, that’s what people want to read. Whenever I write reports and I put in things about that, people are really interested, as it’s an interesting read. These are things that you cannot capture; nobody could know... They have no sense of the intricacies of the group, and these amazing huge things that you can create, but it is so difficult to grab. But when you write about it, you can grab it in a paragraph: ‘they would look at this and this led them to think about this and dah-dah-dah.’ (project staff)}\]

In terms of Thinking Differently being considered a programme in learning and experimentation, at the first learning set (group meeting for all project staff) it was made clear that everyone involved in the projects was on a learning journey, including the funding partnership. Projects were supported to undertake self-evaluation and were also required to participate in the external evaluation. The collaborative learning approach required the projects to reconceptualise failure and accept that if something did not work it was just as important to find out about it as the things that did:

\[\text{I think the critical friend role is an interesting and new one for me. There is often a hostility to evaluation within projects because everyone is target focused and thinking ‘why do I have to do this’, but I think it is helpful to have someone who’s coming in from the outside who you don’t feel is like an inspector and has got that helping aspect, but at the same}\]
time because I think we’re so used to developing monitoring and evaluation ourselves it can feel a bit like ‘oh there’s someone there to help us, this is weird!’ (project staff)

As the projects progressed, a time for reflection was built in by means of the ToC methodology for evaluation and the regular learning set events. This was often a new approach for project staff, who had often not been given the time or been expected to do this before:

- I think projects should do it. I think it’s better to be far more reflective. I think what has been positive is that we have been given the time to reflect. I think quite a lot of projects you don’t have the time to have that reflection time. (project staff)

- Sometimes, when you guys come up, it’s the only time me and [the other project worker] will sit down and talk about the processes and be reflective. We don’t have the time. (project staff)

Developing the ToC as an evaluation framework sometimes helped project staff to maintain a focus on what they wanted to achieve, and to reflect on whether their current practice was achieving the required results or whether their practice needed to be tweaked in any way, akin to an action research model. This level of reflection enabled the projects to be flexible and less focused on performance outputs, and staff felt that the self-evaluation that they undertook improved their practice more generally. At least two of the projects scaled back their initially ambitious project plans in the realisation that the quality of what they were doing, in terms of maintaining a focus on the outcomes and impact, was far more valuable than ensuring quantity.
6 Involving young people

Thinking Differently was a concept designed to promote a new way of tackling an entrenched problem. One of the main differences was to regard young people who are involved in the project as potential agents of change in their different communities, and not to see the young people as the main group in need of a changed approach to alcohol use.

Understandings of what it meant for youth to be agents of change or for projects to be youth led were open to interpretation and, in practice, difficult to define.

Involving young people in project design and practice

Young people had been involved in the development of the ideas in all three projects and been part of the bid for funding at the inception. In MYPAS, young people who had taken part in short time-limited groupwork had expressed a desire for a longer-term groupwork approach. In YMCA Glenrothes, young people on the steering group had felt that they had good ideas to share with adults, and that adults would listen to key messages and be challenged by them if they came directly from young people. In Healthy ‘n’ Happy, young people who were part of ‘The Den’ expressed a desire for better dialogue between young people and other members of the community, and worked with staff to consult other young people and develop the project.

Nevertheless, over time, the involvement of young people necessarily evolved and changed. Most of the young people involved in the project at its inception moved on, and projects had to think of different strategies to keep young people involved in ways that were both acceptable to young people and appropriate to the project aims. In YMCA Glenrothes, for example, the programme was designed by the young people, and they came up with the concept and wrote and presented the bid to the funding partnership. However, the project had to evolve in order to meet its outcomes. While the young people were sure that their concept would work (i.e. if they created messages for parents, they would listen and change their behaviour), this proved not to be the case and, at the end of the first year, the project refocused to conduct more direct work with parents. Indeed, some young people who became involved once the project was underway expressed doubt that they could influence anyone in terms of their drinking. Nevertheless, the Young Educators were excited by the impact that they felt their work was having:
I think I just felt like everything we had been doing had just come together and we were actually getting out there. We hadn’t just wasted all this time; we were getting to do something positive with it. (young educator)

Part of the direct work has been with young parents (aged 15+). The project co-ordinator feels that if the young people had had too much of a lead, the film project to produce key messages, at the beginning of the project, might still be in production thus no further progress would have been made towards any outcomes. However, young people have been heavily involved in project actions and, indeed, have been crucial to ensuring that the model can work. For instance, young people were essential in planning and facilitating the World Café event. The Young Educators have been delivering health messages to other young people and to teachers.

For MYPAS, plans for a youth action group in Year 1 were abandoned, as young people seemed reluctant to become involved. This may have been due to a lack of clarity about what their involvement might look like. In Year 2, MYPAS decided to try to establish an action group, again by running a film project to gain the interest and engagement of young people. An event was held to enable the young people to think about what they felt had to happen next with the film. They had plenty of different ideas and a vote was held to narrow down the suggestions into a workable plan for project staff to organise. It was decided that the first step would be to create some resources and hold an event at which the young people could show the film. Staff were tasked with taking the actions forward.

In Healthy ‘n’ Happy, a youth steering group for the project was set up in the very early days of the project. The group took part in a mixture of fun activities and capacity-building exercises. The aim was that, in time, the group would make decisions about the allocation of the community budget to local projects that would aim to address alcohol-related harm. Up to 11 young people participated at any one point in time, although there were ebbs and flows depending on events such as exams. Staff felt that several key things had enabled the group to work successfully: the creation of a safe space for discussion; a clear remit; building young people’s skills and capacity to engage; going at their pace; utilising their suggestions for structuring sessions; and being flexible and ensuring that everyone could participate in a way that was relevant to them. As one worker commented:

The remit was that we were to get this group of young people who had never been working together within the group before. We were to give them confidence-building skills, group kind of cohesion skills, we were to get them to the stage where, the outcome of it was, we were to take them from here and get them to here, where they would then be
responsible for this piece of money and they would need to have the skills to be able to delegate that money effectively, they were going to be interviewing people who were coming to access that money. So that was the kind of basic remit, and we just looked at that and thought, ‘Right, okay, what kinds of things do we need to then do?’; whether it be their own individual skills, their groupworking skills, look at how other groups are doing things, what kind of things can they borrow from other groups and introduce for themselves. (project worker)

The young people of Rutherglen and Cambuslang became involved in running the Youth Café in Halfway, which was an idea raised in response to the community identifying that there was nothing for young people to do (and thus nothing to prevent them from drinking). One young person then explained what happened next:

We have... instead of giving the power so to speak to an adult we have given the power to the young people and I think we want to help their communities. (young person)

During diamond-ranking² exercises carried out by the research team with young people in all three projects, they demonstrated their desire to have their voices heard. Some young people wanted to change their communities and to help others. Their own development was seen as important in that process, but was secondary to wanting to make a difference. Young people expressed their desire to be active in making a difference:

I think it’s the best reason that I want to help young people make positive choices so we can live in a better environment. (young person)

I’d feel more important knowing that I had made a difference in someone’s life. (young person)

Facilitating the involvement of young people

Project co-ordinators and young people themselves have frequently told us that young people have the ability and desire to be involved, but that they want to be involved in different ways and at different levels that they choose. It often depends on how interested they are in the topic being addressed and the agency that they feel to make a difference:

unless they really, really care about the issue or feel they can make a change, they will only get so far. (project staff)
For some, an understanding of being youth led is based on the relationships and trust that the young people build:

*I think, sometimes people assume that youth led, like young people come up with other ideas themselves, and have the skills and the knowledge ability. It’s a load of nonsense, but what they do do is they come and they pick up from the adults who don’t force things down their throat, they just explore things with them, come up with ideas and explain things... but it’s not, it’s not that we just walk in and go, ’Right, guys, we’re engaged in [this] community... tell me what I should be doing?’ It’s not that kind of relationship. It can’t be, because it’d be too much responsibility for them.* (project staff)

Project staff recognised that, without the necessary skills and confidence, young people might not always be best placed to make decisions at certain points in project development, and an element of risk is introduced if young people are not completely ready. Staff felt that it was more appropriate for them to be constantly questioning young people about their needs and how they could best be supported. This approach was described thus:

*It’s a participation journey that has the ultimate goal of being youth led, and that participation is at various strands, and it supports young people who want that aspiration to reach that goal, but also support for them while they can dip in and out of the participation.* (project staff)

The ways in which young people participate, therefore, have been driven by these understandings and the assessment of their capacities by project workers.

Capacity building to give young people the skills to effect change was part of provision in some cases, but not always. The emphasis here is on ‘give’. Professional cultures espouse the idea that young people need to be provided for, and they need to be given the capacity and skills to engage. Rarely are young people situated as having something to give. Even the outcomes that were commissioned reflect this inherent assumption that young people are in deficit (and, indeed, families and communities, too), and need to be given more awareness and knowledge in order to tackle problems. These entrenched cultural and professional attitudes to young people have made it difficult for projects to reach a balance in ensuring that young people have capacity, providing support or scaffolding for leadership, and driving the agenda too far themselves. In addition to this, community perceptions of young people reflect these professional perceptions, and often put barriers in place, whether intentionally or unintentionally:
Certainly, interesting learning has been around how adults really block things for young people without even knowing that they’re doing it. So if we look at, I suppose the experience that we had, is we had young people blocked out of facilities, we couldn’t access facilities and there are pre-determined ideas about what young people would do in those facilities and the way they’ll behave and that just predetermines whether they can have a space. And if they haven’t got a space then that has actually stopped us from doing constructive longer-term activities. So in some ways we potentially could have had a much bigger impact had we not had those barriers put by adults. (project staff)

So in theory they’re supportive, but… there is a bias against young people, I mean, I’ve experienced it, I’ve been involved with the youth for a large number of years and I’ve seen, any time you go to book something and you ask if it’s available and they say who’s it for? And then if you say it’s for a youth group that they start humming and hawing, and that happens widely, I would say. On the whole, people see young people as a problem, and it doesn’t matter who the young people are. (youth worker)

The expectations of young people themselves often worked against a youth-led approach, as young people did not think that they could influence change.

There is also an inherent assumption in respect of Thinking Differently that alcohol is a topic that young people want to engage with. This was not always the case. YMCA Glenrothes was successful in introducing alcohol to young people as a theme right from the beginning, as the young people themselves understood that the project was aimed at influencing adults:

What was different about Glenrothes… it came from young people [who said] ‘We want to change the culture, and the way we think we can change the culture is by us telling adults’. (project staff)

However, in MYPAS, and Healthy ‘n’ Happy, alcohol was not seen as relevant to many of the young people, who instead talked about e-cigs and new psychoactive substances/NPS as issues of concern to young people:

I suppose the assumption that we made at the beginning was that alcohol will be a hot topic for any young person. What we find across the course of this project [is] that, that message was wrong. (project staff)

Of course, three years on, concern about new psychoactive substances has been taken on board by professionals, and efforts to tackle it are underway.
**Peer relationships as both facilitators and barriers to involvement**

The groups were meant to provide supportive peer networks, but there is evidence that, while this happened for some young people in some groups, it was not always the case. During interviews, young people expressed how important it was to them to meet new people and develop strong friendships:

*Well I wanted to meet new people and see what this group would be like and see like to recommend it to other people once the group started and tell other people about it and how good it was and how you meet other people and get along with them and that.* (young person)

*Really important [to have strong friendships] ’cos if you stick by one of your close friends, then it makes you even stronger. It makes them stronger and they know they have people to talk to and support them, things like that.* (young person)

Nevertheless, the dynamics of the groups seemed vital to whether these friendships could be developed and maintained. One group of boys in MYPAS ceased attending, as it consisted of existing friends who seemed to exert peer pressure not to engage. For some young people, the others in the group were the problem. Relationships were sometimes difficult to develop and maintain if attendance was sporadic, or the young people were late or disruptive.

Many young people in MYPAS disengaged along the way, and recruitment to some of the groups took much time and effort. Young people from the action group who took part in the film project told us that they wanted to develop their confidence and skills to be able to help others to address alcohol-related harm through the film and associated resources.

**Involving young people in evaluation**

There are a range of ways in which young people can be involved in evaluation, ranging from being a participant (being asked to provide date of one form or another) to a co-researcher (acting collaboratively with the adult researchers). Involvement can also happen in varied ways at the different stages of research. Not all young people will find evaluation interesting or relevant to them, and evaluation is not seen as a ‘fun’ activity, as one project noted:

*The focus of the boot camp was data generation and research, which are not traditionally thought of as being fun activities.* (project staff)
Young people have been given the opportunity to engage with the evaluation in various ways and have demonstrated their engagement with the evaluation in ways that have been appropriate to them. Young people have been very welcoming and accepting of the evaluators, and have invited them to observe their activities. For example, a researcher has observed a climbing wall activity with MYPAS, an animation workshop in Glenrothes and the Photovoice workshop in Healthy ‘n’ Happy. Some young people have actively agreed to take part in an interview or focus group, such as those undertaken by the researchers with YMCA Glenrothes Young Educators and film groups, MYPAS intervention and film groups, and Healthy ‘n’ Happy Steering Group and radio group. Many of those who took part in an interview or focus group were also willing to complete evaluation activities. Examples of such activities included: a community consultation wall exercise in Healthy ‘n’ Happy involving children drawing about their lives; various visual methods such as timelines and diamond-ranking exercises (see Clark et al. 2013; Clark 2012 for more details on these methods); quizzes and opinion games; and worksheets. On the whole, young people have enjoyed these opportunities to engage with the researchers and offer their opinions, and the project staff have welcomed the opportunity for young people to give their views to an external person.

Early on in the evaluation, the research team offered to work with young people to enhance their skills in research so that they had the capacity to undertake research themselves if they wanted to. Additionally, some young people in Healthy ‘n’ Happy were very keen to become activists in their local community, and felt that engaging in a programme of work that involved them conducting some research within their own community would be a key activity for them. The staff at Healthy ‘n’ Happy devised a 12-week programme, including a bootcamp, which involved young people identifying key issues relating to community health that they would like to explore. They went on to researching that issue to develop some key messages, and identifying the best ways to share those messages, in order to start to engage the local community, effect change (CO1), and increase their own involvement and contribution in positive activity within the local community (CO2).

As part of that programme, eight young people travelled to Newcastle University to take part in a day of activities aimed at increasing their research skills and enabling them to undertake research in their own community.

The evaluation of the session afterwards showed that the young people had enjoyed taking part (and some had even found it ‘fun’!). We found that they had really taken on board what they had learned, and were beginning to talk in a different way, sounding like researchers, using key terms such as ‘data’, ‘evidence’ ‘questions’ and ‘methods’:
It was interesting how easy it is to research things, and how to split the data into groups. (young person)

It was interesting, different ways of collecting evidence for research. (young person)

Evidence from Healthy ‘n’ Happy subsequently showed that five of these young people had gone on to conduct research with approximately sixty community members about the use of e-cigs, had successfully developed key themes from that research and produced a radio show to disseminate their key messages in the community. It would seem that attending the research day had enabled research to become more accessible to young people and increased their capacity to undertake research within their own communities, which, it is theorised, will lead to greater engagement by the community in health concerns.

Following the success of the work with young people from Healthy ‘n’ Happy, members of the action group in MYPAS attended a weekend residential in Newcastle and undertook similar activities. They learned about planning and carrying out their own research, and undertook activities to plan a piece of work that they could carry out in their local schools. Following this, the evaluators invited them to present at an academic conference.

**Box 5 Focus on: MYPAS action group**

Young people from MYPAS action group took part in a film project. Once the film was produced, a planning day was held at which young people decided they wanted to use the film to stimulate discussion about alcohol. However, they realised that they would need some kind of resource alongside it so the conversations were focused on what young people needed to know about alcohol. The young people decided that they needed to conduct research about what young people want in terms of alcohol education.

Four young people attended a weekend residential at Newcastle University, where they learned about: what research is; the role of a researcher; how to plan research; specific methodologies; and how to analyse and use the findings. They planned a piece of work to undertake in schools using visual methods. The young people enjoyed their experience and learned much:

> When I went down to Newcastle, I didn’nae have a clue about research – I thought I did – but I didn’nae. When you asked us to get into it, I realised I would’nae have known where to start! And if I did start, we would’nae have got as far as we are now. (young person)

Following their involvement with the University, the young people were invited to present their experiences of working with a university research team at an academic conference, Youth Matters, in June 2016. As part of the preparation for this, they produced a video and practised a presentation that was delivered at the conference and was well received by all attendees.
**In summary**

Young people were involved in developing the project ideas in all three projects. By the time the project was funded, however, most young people had moved on to other things and so were not involved in the further project design and practice. Other young people were recruited in all three projects to assist in actions, and this happened to some extent in all projects. While young people were not involved in producing the ToCs that guided the projects, they were involved in the more day-to-day operational decisions. Young people in MYPAS decided what they were going to cover in their groupwork and what activities to undertake, and the action group drove the desire for alcohol education using their film. Young people in Healthy ‘n’ Happy were directly responsible for commissioning work to take place to tackle alcohol issues. YMCA Glenrothes young people were heavily involved in project actions through the Young Educators, and helping to organise and deliver the World Café.

Similarly, young people were involved in the evaluation in different ways, depending on their interests. Involving young people in research takes time – time to establish relationships and trust, and time to develop capacity. Young people told us that they appreciated being able to give their views and be involved. For some, more in-depth involvement was seen as contributing to building their confidence and a capacity for making a difference.
7 Time: Measuring the wider assets available to projects

Identifying and measuring the wider resources needed by projects

The total expenditure of the Thinking Differently budget by the three projects over the three years covered by this evaluation was £592,012. This expenditure consisted of grants to the projects as follows: £207,000 to Healthy ‘n’ Happy; £163,000 to MYPAS; and £222,012 to YMCA Glenrothes. However, as with most social interventions, the Thinking Differently projects depended for their success on the engagement of young people, parents and the wider community.

Therefore, this chapter considers the costs that are not paid for directly from the funding partnership, but arise from using other assets and resources. The key input of this type is usually the time of those people taking part in a variety of ways, and this commitment (time inputs) can be critical to achieving outcomes. From the point of view of the project funding, these are free but, in reality, they do have value to the organisation and the individual providing them. Therefore, we refer to them as unpaid time inputs. They are important for two reasons:

1. *Ignoring them may underestimate the total cost of delivery:* Many social initiatives rely on volunteers and all require the participation of target groups.

2. *The time of beneficiaries is required for the intervention to work:* For all three projects, engagement is key to the activity and lies at the heart of what they do. Time inputs need at least to be considered.

Although we often refer to the ‘costs’ of these time inputs, we emphasise that they are definitely assets to the project. Practitioners would recognise that contributions made by various actors can be critical to meeting project outcomes, and this evaluation has demonstrated this. However, we seldom have consistent evidence of the types of contributions made, their size and how they are viewed by the project. Although the medical literature (see Annexe 3) has started to examine patients’ roles in treatment,
this is a generally under-researched area and, in the field of social interventions, we are not aware of any existing empirical work.

People have had a range of types of engagement with the three projects. In broad detail, the five types we looked at are:

1. **Staff of others**: Paid staff from other organisations provided to the project without charge; their work for the project is part of their normal work.

2. **Unpaid staff**: Volunteers to the organisation having regular hours of work; their work for the project may be part or all their normal work for it.

3. **Activist**: Volunteers on the project who provide advice or work (either alone or with project staff) to develop materials and/or activities; they are likely to have a commitment to regular attendance, even though the sessions that they attend may not be at a given time or place.

4. **Participant**: Person who takes part in an event or uses a product developed as part of the project; they have no obligation to attend/use the product and their participation may be a one-off event, and is likely to be fairly passive.

5. **Service user**: Person who takes part in the project primarily or exclusively for their own benefit and is the organisation’s target beneficiary; this participation may result in benefits to others, but that is not the individual’s primary focus; in a medical intervention, this person is the patient.

The three projects collected data on these time inputs in terms of the person-hours devoted to project activities by each type. We then estimated the monetary cost of this contribution by multiplying the person-hours by standard prices (using the hourly wage that each type of contributor could expect to earn). This is essentially an estimate of what the project might have had to pay each person if it was not offering something that they valued (e.g. volunteers may obtain work experience). One should not place too much emphasis on the specific values estimated here. This analysis is still at an early stage of development, and the estimates should be considered as indicative rather than definitive.

**Key findings on resources and costs: MYPAS**

MYPAS provides services for young people in need of support around alcohol misuse, and its Thinking Differently project extended this approach to a wider target group. It is not surprising, therefore, that the main contributors of ‘free’ time (unpaid time inputs) have been their service users (predominantly the young people who have taken part in the
groupwork). In addition, about 10 per cent of the total ‘free’ inputs were provided by a mix of staff from other organisations and volunteers.

Because most of the ‘free’ inputs were contributed by service users, the total value to MYPAS was relatively small – worth just over 16 per cent of the total project costs in the 18 months for which we have relevant data.

Key findings on resources and costs: Healthy ‘n’ Happy

With its community focus, Healthy ‘n’ Happy consistently has a large contribution by activists and participants, both in total and relative to other ‘free’ time inputs (such as volunteers). Indeed, these two categories account for over 90 per cent of the total unpaid time inputs.

Almost 10 per cent of the total ‘free’ inputs of person-hours were provided by a mix of staff from other organisations and volunteers. Over the three years of the project, these ‘free’ inputs were worth just over 20 per cent of the total costs of the project.

Key findings on resources and costs: YMCA Glenrothes

The policy of working in partnership enabled YMCA Glenrothes to harness a large amount of ‘free’ inputs from partners – almost 1,200 person-hours over the two and a half years, or nine person-hours per week – thus allowing the project to facilitate a large number of activists/participants/service users, at 13,000 person-hours of engagement with participants and service users (more than 100 person-hours per week). This reflects the number of groups that were connected with on a regular basis by partnership working and the use of large events (such as the World Café and the peer educators talking to whole-year groups at local schools).

Partners’ contributions (with a small contribution from volunteers) consisted of about 8.5 per cent of the total ‘free’ time inputs, and the value of that time is estimated as worth almost 41 per cent of the total costs of the project.

Key findings on resources and costs: Comparison across projects

This analysis demonstrates the projects’ different methodologies and approaches. Healthy ‘n’ Happy’s community focus resulted in much greater use of volunteers and activists than the other two projects, which made more use of staff provided by partners. Similarly, YMCA Glenrothes, and Healthy ‘n’ Happy categorised more people as participants, while MYPAS, with its history of delivering targeted services to referrals, identified more service users.
YMCA Glenrothes had a much greater level of time inputs in total than the other two projects. This project had more ‘free’ time inputs from partners, and this facilitated more engagement of activists, participants and service users. With its core business of service level agreements, MYPAS appeared to take the most self-sufficient approach. While the other projects worked to engage a variety of local support, MYPAS focused on promoting engagement by its target group of service users.

Partners’ staff and/or volunteers appear to be useful in facilitating engagement by other groups. Together, they accounted for between 8.5 per cent and 10 per cent of total unpaid inputs, implying that their engagement could be a key to greater engagement by other groups. However, the experience of YMCA Glenrothes (and to some extent of Healthy ‘n’ Happy) was that they can only be deployed effectively with a considerable input of time from project staff.

The total value of the ‘free’ time can be considerable. Across the three projects, we estimated this to be £148,000, amounting to over 30 per cent of the grants received from the Thinking Differently partnership and almost 25 per cent of total costs. These results were dominated by YMCA Glenrothes, for which unpaid inputs were worth 41 per cent of total costs.

Facilitating engagement from partners, the local community and target groups needs to recognise the costs of time to participants. Time is valuable, and the proposed use of that time must appear to be at least as valuable to the individual or organisation donating that time. Although this may be common sense, it is easy to ignore. Although the benefits seemed obvious to the project staff, the intended targets of the intervention may not have perceived it in the same way and, for young people for example, demands of school work and exams are a key alternative demanding their attention.

Engagement of people in project activities in terms of unpaid time is considerable. The level of engagement shown across the three projects by those engaging in activities that were not part of their paid work (that is, all unpaid time inputs that were not from partners) constituted almost 80% of all unpaid time inputs (at least £115,000 of the £148,000). Although it is unlikely that this engagement is always a net benefit, we do know that in the case of Thinking Differently it is worth at least £115,000 to the individuals themselves – the cost of their participation.
8 Conclusions

Given complex and varied decision-making by young people on drinking and the influence of peers, families and communities, there is a need to develop interventions in which the context is alcohol yet young people are not positioned as problematic drinkers.

Three projects were carried out over three years in various organisations in Scotland: MYPAS in Midlothian, focusing on peers; YMCA Glenrothes, with a focus on parents; and Healthy ‘n’ Happy in Rutherglen and Cambuslang, focusing on the young people and their active involvement in community. In each, there was varied evidence of developing knowledge, awareness and discussion about alcohol harms, and some evidence that others took action (i.e. adults seeking help) as a result of young people’s work.

Implications for involving young people in work on alcohol

- Young people can be facilitated to varying degrees to be agents of change in terms of their peers, parents and the wider community.

- It is likely that parents are better engaged directly rather than through messages constructed by young people. Peer education, peer activism and groupwork are promising ways for young people to influence other young people with respect to a range of complex social issues. Many young people are keen to help other young people. Young people respond well to engaging with the community and want to help, but change takes time.

- It was not easy to position alcohol in the projects, as it competed for space with other interests and other health concerns. Many young people in all the projects did not want to talk about their own drinking and, for some, there were more important health issues, such as new psychoactive substances/NPS or e-cigs. There is a dissonance between professionals’ concepts around risky alcohol consumption and societal drinking norms, even for young people.

- The health promotion message around alcohol consumption is arguably near irrelevant if young people do not see it as applicable to them. At best, health promotion messages are confused/unclear and some work is required to figure out how to make any message around alcohol resonate with young people.

- There was much uncertainty in the projects about whether staff should steer the people whom they were working with to a particular message on safer drinking and, if so, what this should be. The project ethos also determined the positioning of alcohol. A focus on only alcohol is unlikely to engage young people. A promising approach for parents is to look at alcohol as one of many health issues.
Implications for effective youth and community development working on complex issues

Alcohol was not the prime focus of any of the projects, but was embedded within general health concerns or attention to community development, so it is not possible to draw out which of the project implications apply exclusively to an alcohol focus and which to more general community development on other issues. This means that some of the evaluation findings also have relevance for effective youth and community development on a wider range of complex social issues, not just alcohol. This would concur with other findings, for example on peer education.

- Place seemed to be an important factor in all projects, posing a different range of challenges in each area, yet all approaches were able to adapt to the characteristics of place. Youth involvement in community approaches is often contingent on the geographically specific resources available in a community.

- The term ‘innovation’ is subject to different interpretations. We have seen that ‘thinking differently’ meant different things to each project. Clarity on what is meant by innovation needs to be communicated at an early stage, for example by funders or commissioners. Some flexibility needs to remain, as innovation cannot always be predicted in advance.

- Setting outcomes in advance can influence the actions. This is at odds with an approach that attempts to involve young people, families and communities. Outcomes can be laden with inbuilt assumptions that may reproduce deficit models about young people (and communities) in the process of attempting to empower them. They also need to use clear language and dialogue to develop a shared understanding of what outcomes mean. It is often easier to evidence outcomes focused on individual behaviour than longer-term community change, leading to a focus on the ‘quick fix’ at the expense of what may be more sustainable, long-term solutions. One solution to this could be a co-production of outcomes in partnership between the funders or commissioners, the organisations delivering, and the young people, families and communities being targeted. Another solution could be the production of principles, rather than specific outcomes, that have space for flexibility to adapt to the needs of communities.

- Partnership with other organisations can considerably increase the reach of projects. Partners and volunteers appear to be a key way of increasing participation and engagement in all projects. Delivery partners (for example schools) can also be barriers if their ways of working are not sufficiently aligned with more innovative or asset-based approaches.
• Full project costs, necessary if replicating or scaling up, include staffing costs in partner organisations and unpaid volunteer inputs, which are not usually calculated. Such costs vary considerably between projects. The data on time inputs have proved to be quite revealing in terms of each project’s methodology and approach. Where implementation fidelity becomes important, projects may find it useful to continue to collect and collate such data to ensure that their methodology remains true to its design, and that any deviations are planned and recognised.

• Building relationships was essential to gain trust from partners and participants in the projects, and eventual engagement. This took time, often in terms of years rather than months or weeks. This requires a consideration of the resources that it is realistic to devote to a project, and a consideration that long-term investment is needed for results to start to show themselves, particularly in respect of longer-term change.

• Young people made a great investment of time in the projects, demonstrating that they are willing and able to be involved if there is some gain to be had (and that gain need not be only for themselves). However, they told us that their involvement needs to be fun, and they want to be supported and facilitated. While recognising their capacity to be agents of change, there is also a need to recognise that their involvement may not necessarily stimulate change, and indeed some young people may not want it to. Young people should be supported to participate in the way that feels most relevant to them. In a culture that supports many different discourses of childhood, the sense of seeing children as ‘in need’ or as ‘a problem to be fixed’ persists. Taking a youth agentic approach within these discourses is extremely difficult, and questions need to be asked about how far it is possible within the current structures of provision.

Considerations for evaluation

• A ToC approach within a project can evaluate outcomes of complex projects while facilitating learning and reflection by those involved, over time. ToC made possible periodic conversations to assess whether the ToC on outcomes based on project actions were on track or whether there was a need to vary the actions and take a different approach.

• Pre-set outcomes and traditional quality assurance reporting regimes of funders and commissioners are likely to constrain project innovation. Habitual methods of reporting outcomes constrained the ways in which these projects were able to respond to a ToC approach. Additional resources are therefore needed to allow
projects the time to innovate, to promote a culture of learning and to work with other reporting mechanisms such as ToC.

- Thinking Differently was described by one project staff member as ‘almost a demonstration project’. Not all staff agreed. They were aware that action learning and evaluation were a large part of the expectations for the projects. In order to ensure that learning takes place over time, strategies to encourage capacity building and reflection need to be built in from the start, and projects must be able to resource these activities sufficiently. The learning sets proved valuable in this regard, alongside an evaluation team ‘on the ground’ with the projects. The peer learning element was found to be particularly useful for project staff, but was often difficult for projects to access in terms of time.

- It is easier to collect data about changes in individuals than it is to collect data about wider change (or, indeed, to attribute it). It is also easier to meet such outcomes. However, they are nuanced, and consideration needs to be taken of who the changes were for, to what extent and in what circumstances. ToC methodology helps in this regard, and can deal with complexity and flexibility. However, to use it effectively requires a more direct role for an evaluator, and the capacity and willingness within projects to engage with evaluation.

- This project used both self-evaluation (for projects) and external evaluation. Projects reported that they found that developing skills in self-evaluation led to an improvement in their practice. Developing capacity in research methodologies enabled the projects to become more reflective and to contribute robust data to the evaluation team, as well as using the methodologies to enhance their own practice. Having an external evaluator involved was seen as valuable to encourage honesty in gathering the views of young people. Nevertheless, confusion about the evaluator role was sometimes evident, particularly in the early days of the evaluation. A continual dialogue between commissioners, projects and evaluators can assist in clarifying the roles and the expectations of evaluation, particularly when there are changes of staff.
Annexe 1: Steps of change

MYPAS

Dalkeith Thinking Differently: Steps of Change

Strand 1: Group work with young people
- Young people participate and are engaged in the project
- Positive relationships are built between staff and young people
- Staff understand the needs of young people
- Young people increase their knowledge of harmful effects of alcohol
- Young people develop positive relationships with peers
- Young people increase involvement in alternatives to drinking
- Young people and peers outcome 1: increase the social and personal development skills of young people in addressing alcohol-related harm

Strand 2: Youth Action Group
- Young people participate and engage in the film project
- Young people increase confidence and self-esteem
- Young people develop skills to keep themselves safer
- Young people become more engaged in services/community
- Young people become peer mentors
- Young people and peers outcome 2: improve young people’s decision-making capacity in relation to the choices they make around alcohol
- Primary Outcome 2: build practical sustainable skills and knowledge to empower young people, parents and carers and the community to take action to address local alcohol concerns

Strand 3: Peer Mentoring
- Young people are recruited and trained as Peer Mentors
- Young people increase confidence and self-esteem
- Young people increase awareness of alcohol issues
- Young people increase knowledge and experience in identified skills
- Young people feel supported by the project
- Young people and peers outcome 3: look to change attitudes and behaviour towards alcohol consumption and associated risky behaviour both at an individual and peer group level
- Young people and peers outcome 4: develop protective peer networks which support harm reduction, moderate behaviour around alcohol, support positive decision-making and build resilience
YMCA Glenrothes

Glenrothes Thinking Differently: Steps of Change

Strand 1: Group Work with Young People
- Young people participate and are engaged in the project
- Young people are actively involved in discussion
- Young people create key messages
- Young people have increased knowledge and awareness of alcohol
- Young people have increased communication skills
- Young people ask more questions
- Young people feel valued
- Young people have healthier attitudes to alcohol
- Young people make informed decisions
- Young people challenge attitudes towards alcohol
- Young people make positive choices

Strand 2: Young People as Young Educators
- Young people are recruited and trained as educators
- Young educators feel supported by the project
- Young educators share key messages with others (age appropriate)
- Young educators become more engaged with the community

Family outcome 1: To enhance families' confidence and ability to develop positive approaches in influencing young people's drinking habits, attitudes and beliefs about alcohol

Primary Outcome 1: Reduce alcohol related harm and associated risky behaviour by young people

Family outcome 2: To increase parents/carers capacity to address and support their children with issues and concerns in relation to alcohol and associated risks

Primary Outcome 2: Build practical sustainable skills and knowledge to empower young people, parents and carers and the community to take action to address local alcohol concerns

Strand 3: Parent and Adult Engagement
- Parents and other adults have increased opportunities to explore their own and their children's relationship with alcohol.
- Parents and other adults will engage with the project
- Parents and other adults access the resources of TD
- Parents and other adults will find the key messages about alcohol relevant to them
- Parents and other adults have increased knowledge about alcohol
- Parents and other adults will be challenged
- Parents and other adults will think differently about their own alcohol relationship
- Parents and other adults will think differently about their own relationship to alcohol
- Parents and other adults will think differently about children's relationship with alcohol
- Parents, other adults and young people will talk to each other
- Parents and other adults have more awareness of local networks of positive support
- Parents and other adults have more awareness of local networks of positive support

Family outcome 3: To promote and improve the understanding amongst parents/carers of the impact their own alcohol use and associated risks may have on their children

Primary Outcome 3: Increase awareness of local networks of positive support
Healthy ‘n’ Happy, Steps of change (Year 1)

Rutherglen Thinking Differently: Steps of Change

Strand 1 Photo voice project

- Young people participate and are engaged in the project
- Young people are actively involved in discussion
- Young people identify local issues and needs
- Young people and other members of the community will talk to each other
- Young people gain skills and increased confidence

Strand 2 Exhibition, Community consultation and Community action group

- Local people will attend the exhibition project
- Local people will engage with consultation
- There is more, and better, intergenerational communication in the community
- The community will identify the key themes to be tackled in their area
- Local people will make the decisions on what action needs to be taken
- Local people will access the resources they need to make change happen
- The community will be aware of changes in their area
- The community will see these changes as positive ones
- There will be an increase in positive perceptions of their community and young people within that community by local residents
- Young people access different activities as an alternative to drinking

Community outcome 1: Engage the local community and affect change on the local alcohol concerns defined by the community

Community outcome 2: Increase the contribution and involvement of young people in positive activities within the local community

Community outcome 3: Reduce the number of alcohol related incidents within the community, particularly amongst young people

Primary Outcome 1: Reduce alcohol related harm and associated risky behaviour by young people

Primary Outcome 2: Build practical sustainable skills and knowledge to empower young people, parents and carers and the community to take action to address local alcohol concerns
Healthy 'n' Happy, Steps of change (Year 2)

Young People
- Young people are engaged by or participate in project activities
- Young people enjoy project activities
- Young people are aware of and are interested in project aims for their local area/for Rutherglen and Cambuslang
- Young people are supported to think about local issues and needs and explore these in creative ways
- Young people are supported to share their thoughts and ideas about local issues and needs with the wider community
- Young people are involved in shaping Thinking Differently activities that they personally access
- Young people are involved in shaping Thinking Differently activities for peers
- Young people choose to be part of project activities rather than riskier alternatives
- Young people in the community feel informed and capable of affecting change on local alcohol concerns and their input is valued by the local community.

Residents
- Residents are engaged by or participate in project activities
- Residents are aware of and are interested in project aims for their local area
- Residents welcome and value the input of individuals connected to the project (staff, young people, activists and local partners) and work effectively with them.
- Residents are supported to think about local issues and needs and to explore these in creative ways
- Residents identify issues to be tackled and opportunities to effect change on local alcohol concerns.
- Residents are involved in shaping Thinking Differently activities for local young people.
- There is more, and better, intergenerational communication in the community.
- Residents ensure local groups, bodies and committees, create opportunities for young people to participate in genuine ways that are accessible and attractive.
- Residents’ perception of their community, and young people living within it, will be more positive.

Activists
- Young people are actively involved in project Steering Group
- Young people identify issues they would like to explore relating to community health (alcohol, tobacco etc.)
- Activists are supported to research their chosen issue and develop key messages/opinions
- Activists are supported by staff to identify appropriate methods to share or profile their messages.
- Activists are supported by staff and residents to share messages/campaigns locally and in wider areas
- Activists inspire and mobilise others to become involved in their campaigns.

Community Outcome 1: Engage the local community and affect change on the local alcohol concerns defined by the community.
Community Outcome 2: Increase the contribution and involvement of young people in positive activities within the local community.
Community Outcome 3: Reduce the number of alcohol related incidents within the community, particularly amongst young people.

Primary Outcome 1: Reduce alcohol related harm and associated risky behaviour by young people.
Primary Outcome 2: Build practical sustainable skills and knowledge to empower young people, parents and carers and the community to take action to address local alcohol concerns.
Notes

1. Simply, a cost benefit analysis attempts to assign a monetary value for achieving a particular outcome, while a cost effectiveness analysis attempts to compare the relative costs of two different actions achieving the same outcomes.

2. Diamond ranking asks the respondent to rank nine items so that one is first, two are second, three are third, two are fourth and one is fifth, or last. Items can be anything including statements or photos. A full description is in Clark (2012).

3. Note that although both ‘unpaid staff’ and ‘activists’ are volunteers, they differ in terms of whether their commitment is to the organisation or the specific project.
References


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